

PD10000088292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

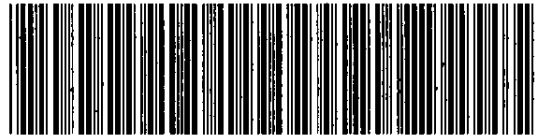
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500163682145

01/07/10--01008--010 \*\*35.00

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JAN -7 PM 4:52

AKA D155  
1a 1/11/10.

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A2Z CLEANING INC.  
(Name of Corporation)  
**DOCUMENT NUMBER:** P01000088292

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

CAROLINE SOUSA

(Name of Person)

ACCOUNT BOOKKEEPING CORP

(Name of Firm/Company)

5950 LAKEHURST DR. STE 246

(Address)

ORLANDO, FL 32819

(City/State and Zip Code)

For further information concerning this matter, please call:

CAROLINE SOUSA at ( 407 ) 898.1757  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

A2Z CLEANING INC.

SECOND: The document number of the corporation (if known): P01000088292

THIRD: The date dissolution was authorized: 12/31/2009

Effective date of dissolution if applicable: 12/31/2009

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signature: \_\_\_\_\_

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Liliosa A. Bento

(Typed or printed name of person signing)

President

(Title of person signing)

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 JAN -7 PM 4:52