## P02000012278

(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:	7					
<b>.</b>						





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SECRETARY OF STATE
SECRETARY OF STATE

10/12

September 30, 2003

Brzoska Home Improvement, Inc. 209 Lora St. (Rear) Neptune Beach, FL 32266 (904) 568-6951 or 568-6952

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

Enclosed is the form for filing articles of dissolution. I, Jason R. Brzoska, am the only officer and shareholder of the business. Also included is \$35 for the filing fee, \$8.75 for a certified copy, and \$8.75 for a certificate of status.

Thank you,

Jason R. Brzoska

## ARTICLES OF DISSOLUTION

	section 607.1403, Florida Statutes, this Florida profit corporation rticles of dissolution:	on submit	O3 OCT -6 PM	
FIRST:	The name of the corporation is: Brzoska Home Improvement	it, Inc.	STATE STATE	
SECOND:	The date dissolution was authorized: September 30, 2003			
THIRD:	Adoption of Dissolution (CHECK ONE)			
	solution was approved by the shareholders. The number of votes sufficient for approval.	cast for d	lissolution	
☐ Dis	solution was approved by vote of the shareholders through voting	groups.		
	The following statement must be separately provided for each votin ntitled to vote separately on the plan to dissolve:	ng group		
The	number of votes cast for dissolution was sufficient for approval b	) Э		
J	ason R. Brzoska			
	(voting group)		***	
Sig	med this30thday ofSeptember,	2003	_•	
Signature _	By the Chairman or Vice Chairman of the Board, President, or other officer)			
	Jason R. Brzoska (Typed or printed name)			
	President (Title)			
	MY COMMISSION DO SOLDY EXPIRES September 17, 2004 BONDED THRU TROY FAIN INSURANCE, INC.			
	9/34/02			