Poa00053450

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City)	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



900253561649

Oliss With notice 11/07/13-01008--011 **35.00



2013 NOV - 7 PM 1:30

11/13/13

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Voluntary Dissol	ution		
DOCUMENT NUMBER: P02000	053450		
The enclosed Articles of Dissolution and f	ee are submitted for filing	3 .	
Please return all correspondence concerning	g this matter to the follow	ring:	
Michael Rothausen			
(Name of Contact Person)			
Quality Home Service, Inc.			
(Firm/Company)			
912 SW 56th Street	,		
(A	ddress)		
Cape Coral, FL 33914		•	
(City/Sta	te and Zip Code)		
For further information concerning this man	tter, please call:		
Michael Rothausen	at (239) 3	14 4711	
(Name of Contact Person)	(Area Code &	Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:		
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amer Divis Clifto	EET ADDRESS: Indment Section It ion of Corporations In Building Executive Center Circle	

Tallahassee, FL 32301



FILED

SECOND: The document number of the corporation (if known that the corporation the corporation that the corporation (if known that the corporation that the co	P02000053450 5/2013 /30/2013 (no more than 90 days after dissolution file date)
THIRD: The date dissolution was authorized: 11/0: Effective date of dissolution <u>if applicable</u> : 11	/30/2013
Effective date of dissolution <u>if applicable:</u> 1	/30/2013
FOURTH: Adoption of Dissolution (CHECK ONE)	
Dissolution was approved by the sharehold was sufficient for approval.	ers. The number of votes cast for dissolution
Dissolution was approved by the sharehold	ers through voting groups.
The following statement must be separately pr to vote separately on the plan to dissolve:	ovided for each voting group entitled
The number of votes cast for dissolution was so	ifficient for approval by
Shareholder	
(voting group)	

Anthonie C. Kremer

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: A C Kremer Corporat	ion
Date of dissolution will be the date the dissolution is filed with th specified in the Articles of Dissolution.	e Department of State or as
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be sent	t to the Division of Corporations)
912 SW 56th Street, Cape	Coral, Fl 33914
	at the grant of th
A claim against the above named corporation will be barred unles within 4 years after the filing of this notice.	ss a proceeding to enforce the claim is commenced
A . 41	
Anthonie Kremer Printed Name of the Person Filing	Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00