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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Friends Financial Services, Inc.
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mark Coller (Name of Person)
(Name of Person)
(Name of Firm/Company)
2960 53rd 5treet
2960 53rd street (Address) Sarasota FL 34234
(City/State/and Zip Code)
For further information concerning this matter, please call:
Mark Coller at (941) 360-1483 (Name of Person) (Area Code & Daytime Telephone Number
(Name of Person) (Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35 Filing Fee \$\to\$ \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & \$\to\$ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of Corporations
P.O. Box 6327 Tallahassee, Florida 32314 Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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 Department of State:
	Friends Financial Services Inc
SECOND:	The document number of the corporation (if known): 102000/0224/
THIRD:	The date dissolution was authorized: $10-1-04$
	Effective date of dissolution if applicable: 12-31-04 (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 of 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)
	Signed this 15th day of December, 2004.
Signat	
	(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)
*	Mark Coller (Typed or printed name of person signing)
•	President/Director
-	(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: Friends Financial Services, Inc
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Date time location of goods delivered or services performed Original invoice Explanation of why invoice was not presented for payment Name and number of whom to contact regarding claim
Explanation of why invoice was not presented for payment
Name and number of whom to contact regarding claim
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 2960 53 rd Street Sarasota, FL 34234
A claim against the above named corporation will be barred unless a proceeding to enforce the claim s commenced within 4 years after the filing of this notice. Mark Colles Mark Colles
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