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SECRETARY OF STATE FALLAHASSEF, FLORIBA



COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: FrTic Les of DissoLutra	<u> </u>
DOCUMENT NUMBER: PO300003	•
The enclosed Articles of Dissolution and fee are submitted	ed for filing.
Please return all correspondence concerning this matter to	the following:
Men C. Morcia (Name of Contact Person	onette
American Service 8 (Firm/Company)	,
161 Gruldwinds Wa	214
Santa Rosa Beach (City/State and Zip Cod	n, FL, 32459
For further information concerning this matter, please call	
her C. Marcionetteat (88) (Name of Contact Person) (Arc	278 - 6576 50) 514 - 2201 ea Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigs\\$43.75 Filing Fee & \$\Bigs\\$43.75 Filing Certified Co (Additional cenclosed)	opy Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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	f State:	
	American Service / Co, INC		
SECOND:	The document number of the corporation (if known): PO30000 3	3897	,
ГHIRD:	The date dissolution was authorized: 3-/3-20/0		
	Effective date of dissolution if applicable: 3-15-2010 (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 was sufficient for approval.	for dissol	utior
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled	
-	The number of votes cast for dissolution was sufficient for approval by		
		i de la companya de l	10
	(voting group)	CRETARY OF T	JU3 -9 PHI2:
•	Signature: Sen Colored 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)	ORIDA	2: 12
	Ten emarcione //e (Typed or printed name of person signing)		
	(Typed or printed name of person signing) President (Title of person signing)		

Filing Fee: \$35