(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	: #)
PICK-UP	· WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: J & N SERVICES INC		
DOCUMENT NUMBER: P030000362	277	
The enclosed Articles of Dissolution and fee	are submitted for filing.	
Please return all correspondence concerning to	his matter to the following:	
ORLY JIMENEZ		
(Name of Co	entact Person)	
J & N SERVICES INC		
(Firm/Company)		
2728 W 60 ST		
(Add	ress)	
HIALEAH, FL 33016		
(City/State	and Zip Code)	
For further information concerning this matter	r, please call:	
ORLY JIMENEZ	at (786) <u>444-4963</u>	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
	\$43.75 Filing Fee & \$52.50 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	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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 o	f State:		
	J & N SERVICES INC	_		
SECOND:	The document number of the corporation (if known): P03000036277	TAISE LES		
THIRD:	The file date of the articles of incorporation: 04/01/2003	CRE		
FOURTH:	(CHECK AT LEAST ONE BOX)	ASSEE		
	None of the corporation's shares have been issued.	FSTA		
	The corporation has not commenced business.	RIDA		
FIFTH:	No debt of the corporation remains unpaid.			
SIXTH:	The net assets of the corporation remaining after winding up have been distrib to the shareholders, if shares were issued.	uted		
SEVENTH:	Adoption of Dissolution (CHECK ONE)			
	A majority of the incorporators authorized the dissolution.			
✓ A majority of the directors authorized the dissolution.				
Signa	ature: (By a director, president or other offiger - if directors or officers have not been selected, by an incoin the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) ORLY JIMENEZ (Typed or printed name of person signing) (Title of Person Signing)	orporator - if		

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: J & N SERVICES INC Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: NONE Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 2728 W 60 ST HIALEAH, FL 33016 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. **ORLY JIMENEZ**

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

Printed Name of the Person Filing