P0300038612

(Requestor's Name)	
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PICK-UP WAIT	MAIL
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(Business Entity Name	e)
(Document Number)	
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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section	
Division of Corporations	
SUBJECT: Precise Pest Control	of So. Florida Inc.
DOCUMENT NUMBER: P0300003	8612
The enclosed Articles of Dissolution and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Robert Hernandez	
(Name of C	ontact Person)
Precise Pest Control of So. F	lorida Inc.
(Firm/	Company)
4103 West Atlantic Boulevard	, Ste. 408
(Add	dress)
Coconut Creek, FL 33073	
(City/State	and Zip Code)
For further information concerning this matter	er, please call:
Robert Hernandez (Name of Contact Person)	at (954) 935-2222 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	: :
▼\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$\sum \$\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) \$\sum \$
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 State:				
	Precise Pest Control of So. Florida, Inc.				
SECOND:	The document number of the corporation (if known): P03000038612				
THIRD:	The date dissolution was authorized: September 19, 2006				
	Effective date of dissolution <u>if applicable</u> : September 19, 2006 (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 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)				
	(voting group)				
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if hr-the hands of a receiver, trustee, or other court, appointed fiduciary, by				
	Robert Hernandez				
	(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:	Precise Pest Control of So. Florida, Inc.			
Date of dissolution wi specified in the Article	ill be the date the dissolution is filed with the Department of State or as es of Dissolution.			
Description of inform	ation that must be included in a claim:			
none				
			06	
Mailing address where	e claims can be sent: (Claims cannot be sent to the Division of Corporation		33 33	777
410	03 West Atlantic Boulevard, Ste. 408	ASSA ASKAL	25	
. <u>Co</u>	conut Creek, FL 33073	E, FE	PM IO:	D
		95	17 :O	
		<u> </u>	4	
A claim against the at within 4 years after th	pove named corporation will be barred unless a proceeding to enforce the e filing of this notice.	claim is	comn	nenceo

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

Signature of the Person Filing

Robert Hernandez

Printed Name of the Person Filing