P03000046999

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900277991719

10/19/15--01033--009 **35.00

2415 OCT 19 PH12: 29

OCT 2 0 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: __ P03000046999 **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **ODLANIER E VALDES** (Name of Contact Person) P&P EXCAVATION SERVICE COMPANY (Firm/Company) 7879 NW 191ST STREET (Address) MIAMI, FL 33015 (City/State and Zip Code) For further information concerning this matter, please call: **ODLANIER E VALDES** (Area Code) (Davtime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) MAILING ADDRESS: STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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: P&P EXCAVATION SERVICE COMPANY					
SECOND:	The document number of the corporation (if known):					
THIRD:	The date dissolution was authorized: 10/13/2015					
	10/13/2015					
*	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
FOURTH:	Adoption of Dissolution (CHECK ONE)					
	Dissolution was approved by the shareholders. The number of votes of was sufficient for approval.	east for o	dissolı	ution		
	☐ Dissolution was approved by the shareholders through voting groups.					
	The following statement must be separately provided for each voting gro to vote separately on the plan to dissolve:	up entitl	'ed			
	The number of votes cast for dissolution was sufficient for approval by	2* (2); 100 (3); 100 (3); 100 (4); 100 (4);	2 \$ 15 0	Par a		
	2	10 m	007 1			
	(voting group)	YOF STATE	9 PH12:29	Anno Anno		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, that fiduciary)	by hy				
	ODLANIER E VALDES					
	(Typed or printed name of person signing)					
	PRESIDENT					
	(Tule of narron signing)		-			