P03000067798

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ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section

Division of Corporations FLORIDA PEST & TERMITE INC. SUBJECT: **DOCUMENT NUMBER:** P03000067798 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Constantin Cora: (Name of Contact Person) Bay Area Pest & Termite Control Inc. (Firm/Company) 16350 SE 97th Avenue (Address) Summerfield, FL 34491 (City/State and Zip Code) For further information concerning this matter, please call: Constantin Cora (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: \$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & \$\sum \$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 Amendment Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

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:		
	FLORIDA PEST & TERMITE INC.		
SECOND:	The document number of the corporation (if known): P03000067798		
THIRD:	The date dissolution was authorized: September 15, 2006		
	Effective date of dissolution if applicable: October 31, 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 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 $\frac{10 \sqrt{31/37}}{10}$		
	Shareholders		
	(voting group)		
	Signature: MASSEE.FLE		
	(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)		
	Constantin Cora		
	(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.

Printed Name of the Person Filing

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. FLORIDA PEST & TERMITE Inc. Name of Corporation: 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: The name, address and federal indentification number of a vendor, customer or employee and the nature of the claim, the amount of the claim and why the entity or individual is making the claim. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 16350 SE 97th Avenue 34491 Summerfield, FL. 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. Constantin Cora

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

Signature of the Person Filing