P03000142536

		_
(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	» #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
ı		1
		1
l		,
1		{
: I		1

Office Use Only



600048407696

03/18/05--01017--002 **43.75



0/53 Jaly

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOlution of Business
DOCUMENT NUMBER: 20-09/3306?
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cecelia Connor
(Name of Person) A C KLEEP SETVICES (Name of Firm/Company)
6473 LONG Breeze Rd
Orlando FZ 328/0 (City/State/and Zip Code)
For further information concerning this matter, please call:
Cecelia Connor at (407) 245-6733 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\times \\$43.75 Filing Fee & Certificate of Status \$\times \\$Certificate of Status \$\times \\$Certified Copy (Additional copy is enclosed) \$\times \\$Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street

Tallahassee, Florida 32399

Tallahassee, Florida 32314

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 of State: A C KLEEN SERVICE SILING.	
SECOND:	The document number of the corporation (if known): 20-09/3306	
THIRD:	The file date of the articles of incorporation:	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.		
SEVENTH:	or the second se	
	A majority of the incorporators authorized the dissolution.	
	☐ A majority of the directors authorized the dissolution.	
	Signed this 15th day of March, 2005.	
S	ignature: (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.)	
	Cecelia Convor (Typed or printed name of person signing) President (Title 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: A C KLEEN SERVICE SITIC.

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:

August / 3, 2004 - Dissolved

Dusiness, due to hurricane, loss

the decrease in business contacts

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

6473 Long Breeze Rd

Original State or as

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.

Cecelia Connor Uselie Connor Signature of the Person Filing

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