## P03000158339

(Requestor's Name)	_
(Address)	—
(Address)	—
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	<del></del> -
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:  Corrutes document  by flyshou can  H 3/1-/10	





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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: HAVE Clint	P. Luby, Inc. (ba) American Standard Morto Services, Inc.
DOCUMENT NUMBER:	/A SErvices, Inc.
The enclosed Articles of Dissolution and	d fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
Clint P. Luby	<del></del>
(Name	of Contact Person)
Clint P. Luby, Inc. (dba),	Imerican Standard Montgage Services, 1 frm/Company)
404 SE 10th Ct.	
	(Address)
Cape Corpl, FL 3	33990
(City/S	State and Zip Code)
For further information concerning this r	natter, please call:
Clint Luky	at (239) 910 4834
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	ount:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$\textsupersupersupersupersupersupersupersuper
MAILING ADDRESS;	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	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 of State:
Clint A	D. Luby, Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: $\frac{12-19-03}{}$
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.  The corporation has not commenced business.
	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:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.  A majority of the directors authorized the dissolution.
Sign	ature:  (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.)  (Typed or printed name of person signing)
	OWNER   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: <u>Clint P. Luby, Inc.</u> 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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.

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