P04000021405

•
(Requestor's Name)
(Address)
(Address)
(Addiess)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

Office Use Only



500155735415

05/11/09--01015--024 **35.00

O9 MAY 11 AM 10: 01
SECRETARY OF STATE TALL AHASSEE, FLORID.

MAY 15 2009

EXAMINER

COVER LETTER *

TO: Amendment Section Division of Corporations		
SUBJECT: Company Dissolved		
DOCUMENT NUMBER: P04000214	05	
The enclosed Articles of Dissolution and fee are submitted	I for filing.	
Please return all correspondence concerning this matter to	the following:	
Juniece Fillinghan	·	
(Name of Contact Person)		
Handyman Solution (Firm/Company)	s, Inc.	
807 Highland Driv (Address)		
Altamonte Springs F (City/State and Zip Code	L 32701.	
For further information concerning this matter, please call:		
<u>Junice Fillingham</u> at (45 (Name of Contact Person) (Are	7) 678-2805 ra Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
_		
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	

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	TRST: The name of the corporation as currently filed with the Florida Department of State:	
	Handyman Solutions Incorporated	
SECOND:	The document number of the corporation (if known): PO 4000021405	
THIRD:	The file date of the articles of incorporation: 02 -03-04	
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:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
	LORIDA LORIDA	
Sign	ature: Julislam	
	(By a director, president or other officer - if directors of 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)	
	Vice 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: Handyman Solutions Inc.
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:
Name of Company Date of Job
Date of 106
Type of job
Complaint
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Handyman Jolutions Inc.
807 Highland Dr.
Altamonte Spgs, FL 32701
Attn: Junièce Fillingham
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.
Junière Fillingham Printed Name of the Person Filing Signature of the Person Filing