PO40000 61076

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Dc	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



100325840871

03/12/19--01017--010 **35.00

A M D 15

MAR 23 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: BILL LENZ IMIGATION DESIGN, INC.				
DOCUMENT NUMBER: POY 0000 61076				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
JOSL M. COMENFOND, ENG. (Name of Contact Person)				
JOSL M. COMENFORD, P.A. (Firm/Company)				
350 CAMINO GARDENS BLVD, #303 (Address)				
BOCA RATON, FL 33432 (City/State and Zip Code)				
For further information concerning this matter, please call:				
Jose M. Conservand at (561 368-0500 (Name of Contact Person) (Area Code) (Daytime Telephone Number)	_			
Enclosed is a check for the following amount:				
S35 Filing Fee S43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:			
	BILL LENZ IRRIGATION DESIGN, INC.			
SECOND:	The document number of the corporation (if known): POY 0000 61076			
THIRD:	The date dissolution was authorized: Nach 8, 2019			
	Effective date of dissolution if applicable: Note: If the date inserted in this block does not meet the applicable statutory filing requirement 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 cast fo was sufficient for approval.	or dissolution		
	☐ Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve:	titled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)	——————————————————————————————————————		
	<u>~</u> ``	2019 ;; .:		
	$\int_{\Omega} d\Omega$	12		
	Signature: (By a director, president or other officer - #-directors or officers have not been selected, by	<u></u>		
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by -	÷.		
	that fiduciary)	28		
	Jagnne Lenz			
	(Typed or printed name of person signing)			
	Personal Representative of the Estate of W. (Title of person signing)	illiam		
	(Title of person signing)	0.5		