

P04000088697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

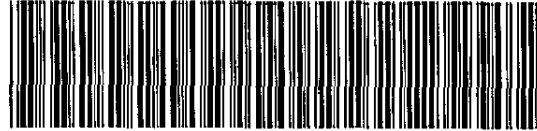
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** HER SERVICES, INC.

**DOCUMENT NUMBER:** PO4000088697

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TIM SHEARS

(Name of Contact Person)

~~250~~

(Firm/Company)

2206 Beach Trail #9

(Address)

Indian Rocks Beach FL 33785

(City/State and Zip Code)

For further information concerning this matter, please call:

Tim Shears

(Name of Contact Person)

at (727) 585-9600

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee     \$43.75 Filing Fee & Certificate of Status     \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)     \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

\$10 +  
\$20  
see attached  
letters

**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  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 30, 2005

TIM SHEARS  
2969 WEST BAY DRIVE  
BELLEAIR BLUFFS, FL 33770

SUBJECT: HER SERVICES, INC.  
Ref. Number: P04000088697

We have received your document for HER SERVICES, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

There is a balance due of \$10.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Document Specialist

Letter Number: 005A00074204

RECEIVED  
-9 AM 8:00  
OF CORPORATIONS

**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:

HER SERVICES, INC.

SECOND: The document number of the corporation (if known): P04000088697

THIRD: The file date the articles of incorporation: 6-8-2004

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.

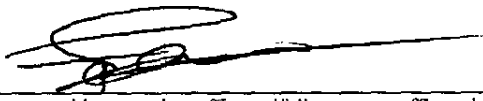
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

A majority of the incorporators authorized the dissolution.

A majority of the directors authorized the dissolution.

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Signature: 

(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.)

TIM SHEARS

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35