## P0400119679

(Re	equestor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Maco Manager	nent, Inc.
DOCUMENT NUMBER: P04000119679	
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Suzanne P. Marks	
(Name of Contact P	erson)
Green Light Realty, LLC	
(Firm/Compar	ny)
324 N Dale Mabry Hwy, Suite 101	
(Address)	
Tampa, FL 33609	
(City/State and Zip	o Code)
For further information concerning this matter, please	e call:
	813 <u>287-1591 ext 130</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certificate	5 Filing Fee & \$\sum \\$52.50 Filing Fee, ed Copy
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

## 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:		
	Maco Management, Inc.		
SECOND:	The document number of the corporation (if known): P04000119679		
THIRD:	The date dissolution was authorized: February 27, 2009		
	Effective date of dissolution if applicable: April 30, 2009  (no more than 90 days after dissolution file date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.		
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:		
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	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)		
	James P. Marks		
	James P. Marks  (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: Maco Managencent, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as

Description of information that must be included in a claim:

specified in the Articles of Dissolution.

Copy of purchase order and invoice

Logies of correspondence or statements

notifying the company of the claim.

Description of claim.

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

Suzanne P. Marks

Yo Affordable Processing Service, Inc.

324 N Dale Mabry Hwy, Suite 100

Tampa, EL 33609

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.

James P. Marks President

Signature of the Person Filing

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