P04000123656

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(But	siness Entity Nar	ne)
(Dog	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to f	Filing Officer:	
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Office Use Only



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SECRETARY OF STATE
TALLAHASSEF FIRM

Commercial MAY 15 2005

· COVER LETTER

Division of Corporations
SUBJECT: Special Touch Mobile Detailing Tro
DOCUMENT NUMBER: P04000 123656
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Andray Brooks Sz. (Name of Contact Person)
Special Touch Motale Istailing Inc. (Firm/Company)
1526 SACKett Circle (Address)
Orlando, F1.32818 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\Bigsquare \\$43.75 Filing Fee & \$\Bigsquare \\$43.75 Filing Fee & \$\Bigsquare \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)
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:
	Special Touch mobile Detailing Inc
SECOND:	The document number of the corporation (if known): P04000 123656
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (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 of 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
	Board of Directors ACC SEE
	(voting group)
	Signature: \$\frac{1}{2} \frac{1}{2} \frac{1} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \frac{1}{2} \f
	(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)
	Mount of ferson signing)
	Filing Fee: \$35
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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: Special Touch mobile betaining
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:
Claimant - Name
- Address
- Invoice # - DATE - Amount
- Type of Service Provided
-Contact name + #
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
P.D. BOX 585216
Orlando, Fl. 32858
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.
Andray Brooks Sr.
Printed Name of the Person Filing Signature of the Person Filing