D04000/34640

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

DS/W/H8/4

TO: Amendment Section	*
Division of Corporations	. 1 1-2
SUBJECT: Notice of Co	rporate Dissolution
SUBJECT: / W COLOR & CO	3 470 200
DOCUMENT NUMBER: PO 400	0134640
The enclosed Articles of Dissolution and fee are su	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Jerry Smill	3
(Name of Contact	Person)
Smilly's Home x	Service, Elic.
2016 mt Plea	A /) /)
Westville F2	32464
(City/State and Zi	ip Code)
For further information concerning this matter, plea	se call:
(Name of Contact Person) at	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status Certif	25 Filing Fee & \$\simeq\$ \$\\$52.50 Filing Fee, ied Copy ional copy is esed) \$\scale=\$ Certificate of Status & 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 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	RST: The name of the corporation as currently filed with the Florida Department of State:	
,	Smilly's Home Service, hic'	
SECOND:	The document number of the corporation (if known): PO 4000134 64	
THIRD:	The file date the articles of incorporation: 9.37-2004	
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.	
Sign	(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.) Tendy Typed or printed name of person signing)	
	President	

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

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