

P04000142267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

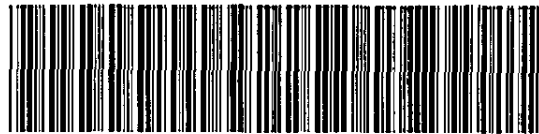
(Document Number)

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*diss*

C. Coulllette JUN 07 2005

# LAZARUS

## CORPORATE FILING SERVICE

Requester's Name

3320 S.W. 87<sup>TH</sup> AVENUE

Address

MIAMI, FL 33165 (305) 552-5973

City/State/Zip

Phone #

Office Use Only

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. RAMOS GENERAL MAINTENANCE SERVICES, INC.  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2.00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

### AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☒ Dissolution/Withdrawal
- ☐ Merger

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

## ARTICLES OF DISSOLUTION

PURSUANT TO SECTION 607.1403, FLORIDA STATUTES, THIS FLORIDA PROFIT CORPORATION SUBITS THE FOLLOWING ARTICLES OF DISSOLUTION:

**FIRST:** THE NAME OF THE CORPORATION IS: \_\_\_\_\_

\_\_\_\_RAMOS GENERAL MAINTENANCE SERVICES, INC.\_\_\_\_\_

**SECOND:** THE DATE DISSOLUTION WAS AUTHORIZED: 06/03/2005

**THIRD:** 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 VOTE OF THE SHAREHOLDERS THROUGH VOTING GROUPS.

THE FOLLOWING STATEMENT MUST BE SEPRATELY PROVIDED FOR EACH VOTING GROUP ENTITLED TO VOTE SEPRATELY ON THE PLAN TO DISSOLVE:

THE NUMBER OF VOTES CAST FOR DISSOLUTION WAS SUFFICIENT FOR APPROVAL BY

\_\_\_\_\_  
(VOTING GROUP)

SIGNED THIS 03 DAY OF JUNE 2005.

SIGNATURE

\_\_\_\_\_  
(BY THE CHAIRMAN OR VICE CHARIMAN OF THE BOARD, PRESIDENT, OR OTHEER OFFICER)

MIGUEL M RAMOS

\_\_\_\_\_  
(TYPED OR PRINTED NAME)

PRESIDENT

\_\_\_\_\_  
(TITLE)

FILED  
05 JUN -7 PM 12:48  
SECRETARY OF THE  
TALLAHASSEE COUNTY