P04000151840

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





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SECRETARY OF STATE
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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: <u>Alliance Apprais al Services Duc</u> Dissolution DOCUMENT NUMBER: <u>P04000 15 840</u>
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
PATRICIA A. MANDERSCHIED (Name of Contact Person)
(Firm/Company)
9070 PASEO DE VALENCIA (Address) FORT MYERS FL 33908 (City/State and Zip Code)
(Address)
FORT MYERS FL 33908
(City/State and Zip Code)
For further information concerning this matter, please call:
PATRICIA A MANDERSCHIED at (289) 851-0137 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:	The name of the corporation as currently filed with the Florida Department of State:
	ALLIANCE APPRAISAL SERVICES INC
SECOND:	The document number of the corporation (if known): D04000151840
THIRD:	The file date of the articles of incorporation: NOVEMBER 4, 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.
	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. A majority of the directors authorized the dissolution.
	A majority of the directors authorized the dissolution.
	STATE ORID
Signa	iture: O. a. Man alunchied (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.)
	P.A. MANDERS CHIED (Typed or printed name of person signing)
	PYST (Title of Person Signing)
	(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: ALLIANCE APPRAISAL SERVICES INC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
There should be no claims - small business
E+O Insurance - no employees - no debters
Mere should be no claims - small business E-10 Insurance - no employees - no debters Dissolution is coming due to lack of work
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.
PATRICIA A. MANDERS CHIED Printed Name of the Person Filing Signature of the Person Filing

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