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(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
•	•	,
(Dc	ocument Number)	
(50	cament Namber)	
Certified Copies	_ Centificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

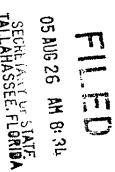


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Diss.





COVER LETTER

TO: Amendment Section Division of Corporations		
Division of Corporations		
SUBJECT: APETICLES OF	Dissoution	
DOCUMENT NUMBER: POSOCOLS	871	
The enclosed Articles of Dissolution and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
ADAM M. ROBE (Name of Pers	<u> </u>	
·		
INTEGRAL Homes (Name of Firm/Con	Inspection, Inc.	
P.O. Sox 11148 (Address)	3	
NAPLES, FLORIDE (City/State/and Zi	7 34108	
(City/State/and Zi	p Code)	
For further information concerning this matter, pleas	se call:	
ADMIN TOTAL	739) 248-4660	
(Name of Person) at ((Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Certificate	5 Filing Fee & \$\infty\$\$ \$52.50 Filing Fee, ied Copy Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations 409 E. Gaines Street	
Tallahassee, Florida 32314	Tallahassee, Florida 32399	

ARTICLES OF DISSOLUTION

articles of dissolution:
FIRST: The name of the corporation as currently filed with the Florida Department of State:
Integral Home Inspection, Inc.
SECOND: The document number of the corporation (if known): POSODO 1887)
THIRD: The file date the articles of incorporation: February 4 th , 2005
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.
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.
Signed this 23^{ro} day of $August$, $august$.
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.)
(Typed or printed name of person signing)
(Title of person signing)

Filing Fee: \$35