## 25000/9353

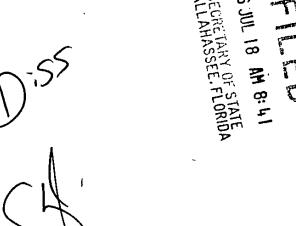
(Requestor's Name)
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## **COVER LETTER**

T.O: Amendment Section

Division of Corporations
UBJECT: Articles of Dissolution to dissolve a Florida profit corporation.
OCUMENT NUMBER: P05000019253
he enclosed Articles of Dissolution and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
RLEEN LAMMONS
(Name of Contact Person)
ammons Accounting & Tax Service
(Firm/Company)
16 Canal Street Suite C
(Address)
lew Smyrna Beach, FL 32168
(City/State and Zip Code)
or further information concerning this matter, please call:
PEDRO A MALDONADO at (_386) 428-4622
(Name of Contact Person) (Area Code & Daytime Telephone Number)
nclosed is a check for the following amount:
\$35 Filing Fee   Status  Certificate of Status  Certified Copy  (Additional copy is enclosed)  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 Ci Tallahassee, FL 32301

	ARTICLES OF DISSOLUTION
Pursuant to soft dissolution	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on:  SECRE JARY 0
FIRST:	TALLAHASSE IARY OF STATE The name of the corporation as currently filed with the Florida Department of States IDA
	PONCE LAWN CARE INC.
SECOND:	The document number of the corporation (if known): P05000019253
THIRD:	The date dissolution was authorized: 12/31/2005
	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 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
	(voting group)
-	
	Signature: A. Mallonalo  (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)
	PEDRO A MALDONADO
	(Typed or printed name of person signing)
	PRESIDENT
	. (Title of person signing)

Filing Fee: \$35