



**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**SUBJECT:** CORPORATE DISSOLUTION

**DOCUMENT NUMBER:** P05000020616

The enclosed Articles of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LEE ANN SALCO

(Name of Contact Person)

LEE ANN & JAY MONTGOMERY HOME REPAIRS COMPANY

(Firm/Company)

PO BOX 5

(Address)

COLERA IN ON 43916

(City/State and Zip Code)

For further information concerning this matter, please call:

JOANNE MONTGOMERY

(Name of Contact Person)

at ( 740 ) 633-0281

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, 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: The name of the corporation as currently filed with the Florida Department of State:

LEEANN & JAY MONTGOMERY HOME REPAIRS COMPANY

SECOND: The document number of the corporation (if known): P005000020616

THIRD: The file date the articles of incorporation: 2-3-05

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.

Signature: LeeAnn Salco Director

(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.)

LEE ANN SALCO

(Typed or printed name of person signing)

DIRECTOR

(Title of Person Signing)

Filing Fee: \$35

FILED  
2006 APR 29 AM 8:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA