P0500002/923

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	#)
PICK-UP	. WAIT	MAIL
(Bus	siness Entity Nam	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

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Property DEC(0.9) 2009)

COVER LETTER

TO: Amendment Section Division of Corporations	•
SUBJECT: CUT AWAY LAWN CA	RE, INC.
DOCUMENT NUMBER: P05000021	923
The enclosed Articles of Dissolution and fe	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
JORGE ARANDA	
(Name of C	Contact Person)
CUT AWAY LAWN CARE INC	
926 18TH PLACE SW	/Company)
(Ac	ldress)
VERO BEACH, FL 32962	•
(City/Stat	e and Zip Code)
For further information concerning this mat	ter, please call:
JORGE ARANDA	at (
(Name of Contact Person)	
Enclosed is a check for the following amoun	nt:
✓\$35 Filing Fee \$43.75 Filing Fee & [Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed) S52.50 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 607.1403, 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:
	CUT AWAY LAWN CARE, INC .	
SECOND:	The document number of the corporation (if known): P05000021923	
ΓHIRD:	The date dissolution was authorized: 10/15/2009	
	Effective date of dissolution if applicable: 12/31/2009 (no more than 90 days after dissolution)	on file date)
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissolution
	Dissolution was approved by the shareholders through voting groups.	9
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled of the control of the contr
	The number of votes cast for dissolution was sufficient for approval by	187 0 PORALIO 2-3 AM 8: 35
	(voting group)	3 5
	Signature: A CV9 Resident 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)	
	JORGE ARANDA	
	(Typed or printed name of person signing)	
	DIRECTOR	
	(Title of person signing)	

Filing Fee: \$35

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Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims gainst 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: CUT AWAY LAWN CARE INC .
Date of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
JORGE ARANDA
926 18TH PLACE SW
VERO BEACH, FL 32962

claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced vithin 4 years after the filing of this notice.
JORGE ARANDA
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