## P05000029477

(Requestor's Name)	500112608615
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	12/03/0701046019 **35.00
(Business Entity Name)	
(Document Number)	DI DEC-3
Certified Copies Certificates of Status	
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations		
SUBJECT: Arti	cles of Disso	Jution
DOCUMENT NUMBER:	- AD	
The enclosed Articles of Dissolution and	fee are submitted for filing	g.
Please return all correspondence concerning	ng this matter to the follow	ving:
Efrain OL (Name of	iver OPtiz	
EfA HOME INSPECTION INC (Firm/Company)		
6314 Hill	Road	
(A	Address)	
Orlando, Fla	prida 32810	)
(City/Sta	ate and Zip Code)	
For further information concerning this matter, please call:		
(Name of Contact Person)	at (407)	721-9509
		Daytime Telephone Number)
Enclosed is a check for the following amou	unt: -	
□\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:		ET ADDRESS:
Amendment Section		ndment Section
Division of Corporations P.O. Box 6327		on of Corporations on Building
Tallahassee, FL 32314		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:

The name of the corporation as currently filed with the Florida Department of State:
EfA HOME Inspections Inc.
The document number of the corporation (if known):
The date dissolution was authorized:
Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution file date)
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
to vote separately on the plan to dissolve:
The number of votes cast for dissolution was sufficient for approval by
2 2 0RIO 6
(voting group)
Signature: Sum Oliver Outing
(By a directory 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)
Etrain Oliver ortiz
(Typed or printed name of person signing)
President (Title of person signing)

Filing Fee: \$35