P0500033908

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	·
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SECRETARY OF STATE
TALLAHASSEF

Who TOE



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 13, 2009

D.J. MUEHLSTEDT BUILDING PROFESSIONALS, INC. 3305 PICKFAIR ST. ORLANDO, FL 32803

SUBJECT: BUILDING PROFESSIONALS, INC.

Ref. Number: P05000033908

We have received your document for BUILDING PROFESSIONALS, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 909A00012331

SECRETARY OF STATE TALLARIDA

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SECEINED.

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: DISSOLUTION	
DOCUMENT NUMBER: 205000033908	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
D. J. MUEHLSTEDT JR. (Name of Contact Person)	
BUILDING PROFESSIONALS, INC. (Firm/Company)	
_	
3305 PICKFAIR ST. (Address)	
ORLANDO, FL 3Z803 (City/State and Zip Code)	
For further information concerning this matter, please call:	
D. J. MUEHLSTEDT at (407) 340 - 2023 (Name of Contact Person) (Area Code & Daytime Telephone Number	<u>S</u>
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, \$\bigcom \text{Certified Copy} & \text{(Additional copy is enclosed)}	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, 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:
	BUILDING PROFESSIONALS INC
SECOND:	The document number of the corporation (if known): P05000033908
THIRD:	The date dissolution was authorized: $\frac{2/23/2009}{}$
	Effective date of dissolution if applicable: 2/23/2009 (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
	REGISTERED AGENT - D. J. MUEHLSTEDT
	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)
	T.J. MUEHUSTEDT JR. (Typed or printed name of person signing)
	REGISTERED AGENT/OWNER/PRESIDENT

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against 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:	BUILDING	PROI	ESSIONA	US, INC.	
Date of dissolution will be specified in the Articles of	be the date the dissolution is of Dissolution.	s filed with the	Department of State	or as	
Description of information	on that must be included in	a claim:			
					
					_
Mailing address where c	claims can be sent: (Claims	cannot be sent t	o the Division of Co	ornorations)	
-					
3	305 PICK DIZLANDO,	FAIR	<u>57. </u>		
0	IZLANDO,	FL	32803		
A claim against the abov within 4 years after the fi	ve named corporation will b filing of this notice.	e barred unless	a proceeding to enfo	orce the claim is comme	nced
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