

PDF00000373411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

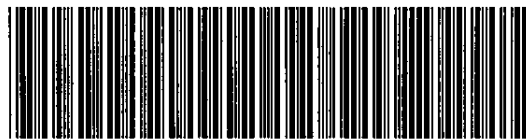
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900259539379

05/01/14--01006--004 **35.00

FILED
14 MAY -1 PM 3:17
SECOND JURY W/ STATE
TALLAHASSEE, FLORIDA

WOW

MAY 08 2014

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Yard Detailer, Inc

DOCUMENT NUMBER: P05000037341

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

Please return all correspondence concerning this matter to the following:

Margaret Holcomb
(Name of Contact Person)

The Yard Detailer, Inc
(Firm/Company)

709 Saint Michael Lane
(Address)

Altamonte Springs, FL. 32714
(City/State and Zip Code)

For further information concerning this matter, please call:

Margaret Holcomb at (407) 862-7649
(Name of Contact Person) (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

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: The Yard Detailer, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

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)

709 Saint Michael Lane
Altamonte Springs, FL 32714

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

Printed Name of the Person Filing Margaret Holcomb
Signature of the Person Filing Margaret Holcomb

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00