

P05000069083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

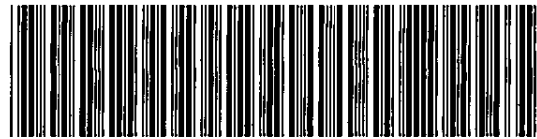
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08 APR 30 PM 1:03  
TALLAHASSEE, FLORIDA

DISS.

28 4/30



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 11, 2008

JAIME MARRERO  
JAIME MARRERO LAWN CARE INC.  
9 OLD SOUTH RD  
SOUTHBRIDGE, MA 01550

SUBJECT: JAIME MARRERO LAWN CARE INC.  
Ref. Number: P05000069083

We have received your document for JAIME MARRERO LAWN CARE INC. and check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date the dissolution was authorized must be completed in paragraph THIRD. I could not reach you by phone.

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) 245-6901.

Susan Payne  
Senior Section Administrator

Letter Number: 908A00021709

RECEIVED  
2008 APR 30 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of corporation

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Jaime Marrero  
(Name of Contact Person)

Jaime Marrero Lawn Care Inc.  
(Firm/Company)

9 Old South RD  
(Address)

Southbridge MA 01550  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jaime Marrero at (774) 402-8336  
(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

## 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:  
Jaime Marrero Lawn Care Inc.

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

THIRD: The date dissolution was authorized: 11-15-07

Effective date of dissolution if applicable: \_\_\_\_\_  
(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

Jaime Marrero  
(voting group)

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)

Jaime Marrero  
(Typed or printed name of person signing)

President  
(Title of person signing)

Filing Fee: \$35

FILED  
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