P050000 94833

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TALL AHASSEE FISTALE

TO THE NOVE 23 THIS

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Joy F. J. Merwices, Inc.		
DOCUMENT NUMBER: P0 50 000 968 33		
The enclosed Articles of Dissolution and fee are submitted fo	r filing.	
Please return all correspondence concerning this matter to the	following:	
Sharan Dodl - Blake. (Name of Contact Person)		
Joy E. I. Services, tinc. (Firm/Company)		
164 Plumosus Druie		
(Address)	Management Committee Commi	
Altamonye Springs FL 3276 (City/State and Zip Code)) <u> </u>	
For further information concerning this matter, please call:		
Shapon Dobb - BLAKE at (407 (Name of Contact Person) (Area C) 767-0940 ode & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$	Certificate of Status &	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
•	Tallahassee, FL 32301	

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	TRST: The name of the corporation as currently filed with the Florida Department of State:	
	Joy E. I. Services, Irc.	
SECOND:	The document number of the corporation (if known): P050000 96833	
THIRD:	The file date the articles of incorporation: $\frac{7-11-0.5}{}$	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
	A majority of the directors authorized the dissolution.	
Sign	ature: Ol. Dott-Blake, OTE/L	
	(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.)	
	SHARON DODD -BLAKE (Typed or printed name of person signing) Provident Owner (Title of Person Signing)	
	Prosident Owner (Title of Person Signing)	

Filing Fee: \$35