

P05000107765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

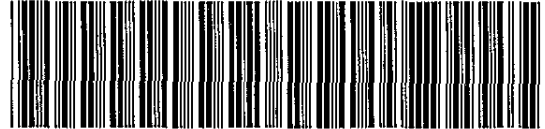
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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*disc
with
notice*

FILED
05 SEP 28 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Boo
9/28/05*

RECEIVED
05 SEP 28 AM 11:13
DIVISION OF CORPORATION



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 618264 7496901

AUTHORIZATION :

COST LIMIT : \$ 35.00

Patricia Pignatelli

ORDER DATE : September 26, 2005

LISTR TIME : 9:46 AM

ORDER NO. : 618264-005

CUSTOMER NO: 7496901

CUSTOMER: Mr. Thomas Horvath
Mr. Thomas Horvath
8311 65th Street North

Pinellas Park, FL 33781

DOMESTIC FILINGS

NAME: JOE'S HOME SERVICE, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT# 2940

EXAMINER'S INITIALS: _____

ARTICLES OF DISSOLUTION

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

FILED
05 SEP 28 PM 3
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with Department of State:

JOE'S HOME SERVICE, INC.

SECOND: The document number of the corporation (if known): 905000107765

THIRD: The file date of the articles of incorporation was: 8-3-2005

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.

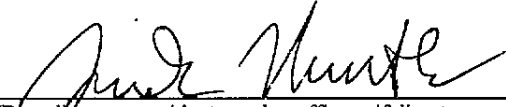
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signed this _____ day of 9-20-2005

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.)

JOSEPH HORVATH

(Typed or printed name of person signing)

OWNER/DIRECTOR

(Title of person signing)

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: JOE'S HOME SERVICE, 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:

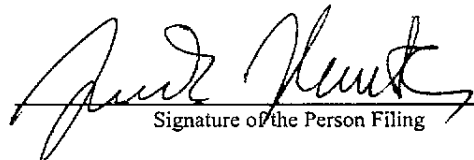
Name, address, phone, dollar amount

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

8311 65th St N
Pinellas Park, FL 33781

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.

JOSEPH HORVATH
Printed Name of the Person Filing


Signature of the Person Filing