## P05080110138

(Ře	equestor's Name)			
· (Ad	ldress)			
, (Ad	ldress)	<u></u>		
· (Cil	ty/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



400109195004

09/17/07--01009--017 \*\*43.75

SECRETARY OF STATE
TALL AHASSEE, FLORIDA

EP 17 AH 9: 01

0/15

C. Coulliette SEP 2 0 2007

## COVER LETTER

TO: Amendment Section

Division of Corporations						
SUBJECT: FIRST COUNTRYWIDE SERVICES, INC.						
The enclosed <b>Articles of Dissolution</b> and fee are submitted for filing.  Please return all correspondence concerning this matter to the following:						
					THORSTEN R. STEIN	
					(Name of Contact Person)	
(Firm	n/Company)					
1828 NE VAN LOON TERRACE						
	ddress)					
CAPE CORAL, FL 33909						
· (City/Sta	te and Zip Code)					
For further information concerning this mat	ter, please call:					
	239					
THORSTEN R. STEIN	at ( <b>,209</b> ) 443-9925					
(Name of Contact Person)	(Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amou	nt:					
□\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	✓ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  Solution    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:		
	FIRST COUNTRYWIDE SERVICES, INC.			
SECOND:	The document number of the corporation (if known): P05000110138			
THIRD:	The date dissolution was authorized: 12/31/2006			
	Effective date of dissolution <u>if applicable:</u> 12/31/2006  (no more than 90 days after dissolution for the properties of	île date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	or dissolution		
	Dissolution was approved by the shareholders through voting groups.			
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled		
	The number of votes cast for dissolution was sufficient for approval by			
		7	** •	
	(voting group)	07 SI SECR	• .	
		SEP 17 AM CRETARY OF AHASSEE, F	AND	
	(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)	STATE LORIDA	<u></u>	
	THORSTEN R. STEIN			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35