P05000125774

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to I	Filing Officer:	
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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COVER LETTER

`TO: Amendment Section Division of Corporations	
2 aviolan di Colpolunono	
SUBJECT: LAGUER SERVIC	ES, INC.
DOCUMENT NUMBER: P050001	25774
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
JOAB LAGUER GUZMAN	
(Name of	Contact Person)
(Fire	m/Company)
`	
5760 DEWITT PLACE	Address)
`	,
LAKE WORTH, FLORIDA	
(City/Sta	ate and Zip Code)
For further information concerning this ma	atter, please call:
IOAD LAGUED	
JOAB LAGUER	at ()
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	int:
\$35 Filing Fee \$\mathbb{Z}\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	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:	The name of the corporation as currently filed with the Florida Department of State: LAGUER SERVICES, INC.
SECOND:	The document number of the corporation (if known): P05000125774
THIRD:	The file date of the articles of incorporation: 09/12/2005
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.
Signature: (B) a director, president or other office 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.)	
	JOAB LAGUER
	(Typed or printed name of person signing)
	PRESIDENT (Title of Person Signing)
	(ritte or reison signing)

Filing Fee: \$35