

PO5000160884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

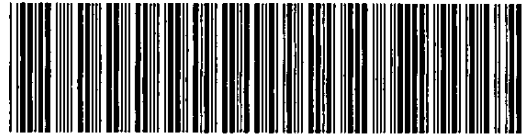
(Business Entity Name)

(Document Number)

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06 AUG -3 PM 1:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

POST AUG 2 2006

DIS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SERVICLAVER, INC.

DOCUMENT NUMBER: P05000160884

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

Please return all correspondence concerning this matter to the following:

MIGUEL CLAVEL
(Name of Contact Person)

SERVICLAVER, Inc.
(Firm/Company)

3533 NW 9th St.
(Address)

Pembroke Pines, FL 33028
(City/State and Zip Code)

For further information concerning this matter, please call:

Miguel Clavel at (954) 2973139
(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2006

MIGUEL CLAVEL (CLAVEL)
13533 NW 9 ST
PEMBROKE PINES, FL 33028

SUBJECT: SERVICLAVEL .INC
Ref. Number: P05000160884

We have received your document for SERVICLAVEL .INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order for us to dissolve your corporation you must first fill out Articles of Dissolution and send them in. I am sending another set of those articles.

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) 245-6927.

Tracy Smith
Document Specialist

Letter Number: 206A00046231

RECEIVED
06 AUG -3 AM 8:00
DIVISION OF CORPORATIONS

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:

SERVICIAVEL, INC

SECOND: The document number of the corporation (if known): P05000160884

THIRD: The file date of the articles of incorporation: 12/09/2005

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.

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.)

MIGUEL CLAVEL

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35