## P060000019316

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: PO600019316
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
John M. Williams (Name of Contact Person)
Southwest Florida Home Repair, Inc. (Firm/Company)
11959 Cypress Links Dr. (Address)
Fort Myers FL 33913
City/State and Zip Code)
For further information concerning this matter, please call:
Tohn M. Williams at (239) 561-6812  (Name of Contact Person) (Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$\sqrt{35}\$ Filing Fee \$
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 607.1401, 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:
	Southwest Florida Home Repair, Inc.
SECOND:	The document number of the corporation (if known): POUDOO 01931 U
THIRD:	The file date of the articles of incorporation: $\frac{2/07/2006}{}$
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: And Miles Alles (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.)
	Tohn M. William 5 (Typed or printed name of person signing)
	Owner (Title of Person Signing)

Filing Fee: \$35