

706000037955

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1-25-13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: PO6000037955

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

Please return all correspondence concerning this matter to the following:

JAMES F COFFEY

(Name of Contact Person)

TRANS STATE SERVICES, INC

(Firm/Company)

8224 DAMARA DRIVE

(Address)

NEW PORT RICHEY, FL 34653

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES COFFEY

(Name of Contact Person)

at (**727**) **264-8663**

(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

ARTICLES OF DISSOLUTION

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of d

Florida Statutes, this Florida profit corporation submits the following articles

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

TRANS STATE SERVICES, INC

SECOND: The document number of the corporation (if known): P06000037955

THIRD: The date dissolution was authorized: JAN 7, 2013

Effective date of dissolution if applicable: JAN 10, 2013
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

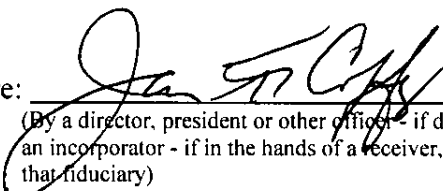
☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

JAMES COFFEY - PRESIDENT

(voting group)

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)

JAMES F COFFEY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

FILED
13 JAN 25 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA