P06000141145

(Requestor's Name)	
(Address)	
(Address)	
(indicate)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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07/09/08--01012--012 **43.75

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SECRETARY OF STATE

Dissolution

TB 7/1/08

COVER LETTER

TO: Amendment Section Division of Corporations	
Division of Corporations	
SUBJECT: dissolution of corporation	on
DOCUMENT NUMBER: POLOCO	0141145
The enclosed Articles of Dissolution and fe	ee are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Jody Evers	
(Name of	Contact Person)
Evers Landscape Design & main	tanance
(Firm	n/Company)
5357 se Isabelita Ave.	
(Ac	ddress)
Stuart, FI 34997	
(City/Stat	te and Zip Code)
For further information concerning this mat	ter, please call:
jody evers	at (_772) 403-4020
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	nt:
\$35 Filing Fee \$\bigs\tag{\$43.75 Filing Fee & Certificate of Status}	X\$43.75 Filing Fee & ☐\$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) 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:	ST: The name of the corporation as currently filed with the Florida Department of State:	
	Evers Landscape Design R maintanance Inc.	
SECOND:	The document number of the corporation (if known): PO6000141145	
THIRD:	The date dissolution was authorized: 07 07 2008	
	Effective date of dissolution if applicable: 07 107 2008 (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	
	(voting group)	
	ASSET 19 LT	
	Signature: Company Employed	
•	Simulation of the state of the	
	(By a frector, 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 Evers (Typed or printed name of person signing)	
,	(-),p p	
	(Title of person signing)	

Filing Fee: \$35