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## **COVER LETTER**

TO: Amendment Section Division of Corporations	·	
SUBJECT: DISSOLUTION P	1,	
DOCUMENT NUMBER: POLOOC	146381	
The enclosed Articles of Dissolution and for	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
ariana-Galaza	at	
(Name of	Contact Person)	
$=$ $E^3 \stackrel{?}{4} \stackrel{?}{4} \stackrel{?}{5}  Land$	Scape Services Corp.  (Company)	
(Firm	n/Company)	
P.O. Box. #6775 (Address)		
(Ac	ddress)	
Fort Myers, Fl.	orida 33911	
(City/Stat	te and Zip Code)	
For further information concerning this mat	ter, please call:	
ariana Salazar		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount	nt:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & ★ \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy enclosed) Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	

Tallahassee, FL 32314

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:	The name of the corporation as currently filed with the Florida Department of State:	
	E396'S landscape Services Corp.	
SECOND:	The document number of the corporation (if known): POOOO 146381	
THIRD:	The date dissolution was authorized: 6/25/07	
	Effective date of dissolution if applicable: (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 of 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	
	Muana Salazar	
•	Signature:  (By a director, president or other officer - if directors or officers have not been selected, by that fiduciary)  (By a director, president or other officer, trustee, or other court appointed fiduciary, by that fiduciary)	
	Ariana Sala Zor  (Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35