POLDOU 56758

(Requestor's Name)	.
(Address)	
(Address)	•
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
. (Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE A

COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: CLOSING A CORPORATION **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ERICA FOUREAUX (Name of Contact Person) FASC SERVICES CORP (Firm/Company) 2885 WINKLER AVE #605 (Address) FORT MYERS FLORIDA 33916 (City/State and Zip Code) For further information concerning this matter, please call: at (239) 826-7145 ANDREA FARIA (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ✓\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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:
	FASC SERVICES CORP
SECOND:	The document number of the corporation (if known): POLOLOCO 15675 8
THIRD:	The file date of the articles of incorporation: 06.03.2008
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:	No debt of the corporation remains unpaid. The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE)
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Sign	ature: Emin Foun L
	(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.)
	ERICA FOUREAUX
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: FASC SERV	/ICES CORP	
Date of dissolution will be the date the diss specified in the <i>Articles of Dissolution</i> .	ssolution is filed with the Department of State or as	
Description of information that must be inc	ncluded in a claim:	
Mailing address where claims can be sent:	: (Claims cannot be sent to the Division of Corporations)	
2885 WINKLER A	AVE #605	
FORT MYERS F	FLORIDA 33916	
A claim against the above named corporati within 4 years after the filing of this notice	tion will be barred unless a proceeding to enforce the claim is e.	s commenced
ERICA FOUREAUX	E - Ca	. 1
Printed Name of the Person F	Filing Signature of the Person Filing	4