## P07000070891

(Requestor's Name)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	s
Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Amendment Section **Division of Corporations** SUBJECT: Dissolution of Acme Client Care Inc. DOCUMENT NUMBER: P07000070891 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Clifford Shannon (Name of Contact Person) Acme Client Care (Firm/Company) 517 NE 11th Ave (Address) Pompano Beach, FL 33060 (City/State and Zip Code) For further information concerning this matter, please call: Clifford Shannon (Name of Contact Person) Enclosed is a check for the following amount: □\$35 Filing Fee ✓\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## 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:
	Acme Client Care, Inc.
SECOND:	The document number of the corporation (if known): P07000070891
THIRD:	The file date of the articles of incorporation: 06/18/07
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:  (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.)
	Clifford Shannon
	(Title of Person Signing)  (Title of Person Signing)

Filing Fee: \$35