## 407000079044

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	MAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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02/25/11--01032--019 \*\*35.00

D/WILLINGTO Www date 3-6.11



n 3-1-11

## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations

SUBJECT: Articles of	Dissolution
DOCUMENT NUMBER: POT 060	079044
The enclosed Articles of Dissolution and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Donna Mo (Name of Con	ntact Person)
Everyday Con	Cieros Dic.
(, , , , , , , , , , , , , , , , , , ,	
·	2 2 3 2 7 5 7 1 2 1 2 1 p Code)
For further information concerning this matter, p	
Name of Contact Person)	at (40) 682-1442 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status	\$43.75 Filing Fee & \$\ \text{Certified Copy} \\ (Additional copy is enclosed) \\ \text{S52.50 Filing Fee,} \\ \text{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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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:
	Everyday Concierge, Onc.
SECOND:	The document number of the corporation (if known): Pondoon 19044
THIRD:	The date dissolution was authorized: Feb 18, 2011
	Effective date of dissolution if applicable:
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)
	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)
	(Typed or printed name of person signing)
	(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: Everyday Conciercy, Orc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: there are no outstanding claims Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Donna M. Morton 126 Primose Dr. A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00