107000090065

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PiCK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
		,

Office Use Only



100149600401

04/13/09--01004--013 **43.75

09 APR 13 AM 8:14
SECRETARY OF STATE
AHASSEE, FLORID

C.COULLIETTE

APR 16 X009

EXAMINER

COVER LETTER

TO: Amendment Section **Division of Corporations SUBJECT: DISSOLUTION OF INCORPORATION** DOCUMENT NUMBER: P07000090065 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JEFFREY C. WANDER (Name of Contact Person) MIAMI SPECIAL SERVICES, INC. (Firm/Company) 4829 SW 154 AVENUE (Address) MIAMI, FL 33185-4443 (City/State and Zip Code) For further information concerning this matter, please call: JEFFREY C. WANDER (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.

Certified Copy (Additional copy is

enclosed)

Certificate of Status

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

Certificate of Status &

Certified Copy

enclosed)

(Additional copy is

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:		
	MIAMI SPECIAL SERVICES, INC.		
SECOND:	The document number of the corporation (if known): P07000090065		
THIRD:	The date dissolution was authorized: 12/31/2008	_	
	Effective date of dissolution if applicable: 12/31/2008 (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.	nc	
	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		
	O JAT		
	Signature: (By a director, president or other officer - if directors or officers have not been selected. by that fiduciary)		
	JEFFREY C. WANDER		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35