P07000094174

| (Re | questor's Name) | |
|---------------------------|-------------------|-------------|
| | | |
| (Add | dress) | |
| | | |
| (Add | dress) | |
| | | |
| (City | y/State/Zip/Phon | e #) |
| | | |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bus | siness Entity Na | me) |
| (=3. | | , |
| (Doc | cument Number) | |
| (500 | ournent reuniber, | |
| Cartified Capies | Cortificato | s of Status |
| Certified Copies | . Centificates | s or Status |
| | | |
| Special Instructions to F | Filing Officer: | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



000111347560

Voldi 4rotice
Thewis 11/05/07--01007--013



COVER LETTER

, TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| UBJECT: Customized Cleaning Services, Inc. | | |
|---|--|--|
| OCUMENT NUMBER: P07000094174 | | |
| he enclosed Articles of Dissolution and fee are submitted for filing. | | |
| lease return all correspondence concerning this matter to the following: | | |
| Stacy Stevens | | |
| (Name of Contact Person) | | |
| Customized Cleaning Services, Inc. | | |
| (Firm/Company) | | |
| PO Box 276 | | |
| (Address) | | |
| pex, NC 27502 | | |
| (City/State and Zip Code) | | |
| or further information concerning this matter, please call: | | |
| Stacy Stevens at (919) 201-7571 (Name of Contact Person) (Area Code & Daytime Telephone Number) | | |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) | | |
| nclosed is a check for the following amount: | | |
| \$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) | | |
| MAILING ADDRESS: Amendment Section Division of Corporations STREET ADDRESS: Amendment Section Division of Corporations | | |

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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: | |
|----------|---|--|
| | Customized Cleaning Services, Inc. | |
| SECOND: | The document number of the corporation (if known): P07000094174 | |
| THIRD: | The file date of the articles of incorporation: 08/22/07 | |
| 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 of other officers if director) 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.) | |
| | Stacy Stevens (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: Customized Cleaning Services, Inc. |
|--|
| 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: |
| Name of Claimant |
| Date of Claim |
| Nature of Claim |
| Amount of Claim |
| Address of Claimant |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) PO Box 276 |
| Apex, NC 27502 |
| |
| |
| 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. |
| Stacy Stevens |

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

Printed Name of the Person Filing