108000015073

(Re	equestor's Name)	
(Ad	Idress)	
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(Ad	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
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OF CORPORATIONS

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COVER LETTER

'TO: Amendment Section

Division of Corporations

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SUBJECT: HANDYMAN REPAIRS IN	С	
DOCUMENT NUMBER: <u>P08000015073</u>	**************************************	
The enclosed Articles of Dissolution and fee are subm	itted for filing.	
Please return all correspondence concerning this matter	r to the following:	
PEDRO ARAGON		
(Name of Contact Per	son)	

(Firm/Company)		
P O BOX 2713		
(Address)		
IMMOKALEE FL 34143		
(City/State and Zip C	Code)	
For further information concerning this matter, please call:		
PEDRO ARAGON at (2	239 ₎ <u>601 3451</u>	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certified (Addition enclosed)	Copy Certificate of Status & Certified Copy	
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



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:		
	HANDYMAN REPAIRS INC .		
SECOND:	The document number of the corporation (if known): P08000015073		
THIRD:	The date dissolution was authorized: 4/20/2009		
	Effective date of dissolution if applicable: 4-30-09 (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.		
	was sufficient for approval. Dissolution was approved by the shareholders through voting groups.		
	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 east for dissolution was sufficient for approval by		
	(voting group)		
	Signature: (By addrector, 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)		
	PEDRO ARAGON		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of nerson signing)		

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Filing Fee: \$35