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TO: Amendment Section

Division of Corporations SUBJECT: GRAF HOME REPAIR, INC DOCUMENT NUMBER: P08000018867 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JAKOB GRAF (Name of Contact Person) GRAF HOME REPAIR, INC (Firm/Company) 325 W. MELODY LANE (Address) CASSELBERRY, FLORIDA 32707 (City/State and Zip Code) For further information concerning this matter, please call: JAKOB GRAF (Name of Contact Person) Enclosed is a check for the following amount: \$35 Filing Fee \(\subseteq \\$43.75 \) Filing Fee & \(\subseteq \\$43.75 \) Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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:
	GRAF HOME REPAIR, INC
SECOND:	The document number of the corporation (if known): P08000018867
THIRD:	The date dissolution was authorized: 12/30/2008
	Effective date of dissolution <u>if applicable:</u> 1/02/2009 (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.
	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)
	JAKOB GRAF
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

Filing Fee: \$35