

PD8000020341

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 JAN 22 AM 11:13

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARTICLES OF DISSOLUTION

DOCUMENT NUMBER: REF P080000 20341

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Luisa Guido

(Name of Contact Person)

AT YOUR SERVICES FOR YOU, INC

(Firm/Company)

24571 SW 112 CT HOMESTEAD FL 33032

(Address)

HOMESTEAD FL 33032

(City/State and Zip Code)

For further information concerning this matter, please call:

Luisa Guido

(Name of Contact Person)

at (305) 979 2293

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☒ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee,
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

Internal Revenue Service
Attn: EO Entity
Mail Stop 6273
Ogden, UT 84201

(or you may fax it to (801) 620-3249 or (801) 620-3263).

State the reason you wish to close your account. If you have a copy of the EIN Assignment Notice that was issued when your EIN was assigned, you should include that when you write. Otherwise, be sure to include the complete legal name of the entity, the EIN, and the mailing address.

Oct 20, 2008

I am requesting to close this account never used never open a bank account. Reason because we close not money to open the new business.

Please close this account attach copy of EIN

Thank you,

Luisa Guido

EIN# 26-2098356

305-979-2293

RECEIVED
2009 JAN -9 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Please remove this Company

Never DCTIVE

Annual Report notice

Document

P08000002034/



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 12, 2009

AT YOUR SERVICES FOR YOU, INC.
24571 SW 112TH COURT
HOMESTEAD, FL 33032

SUBJECT: AT YOUR SERVICES FOR YOU, INC.
Ref. Number: P08000020341

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 409A00000923

RECEIVED
2009 JAN 22 AM 8:00
DIVISION OF STATE
TALLAHASSEE, FLORIDA

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:

At Your Services For You, Inc.

SECOND: The document number of the corporation (if known):

PO8000080341

THIRD: The file date of the articles of incorporation:

02/25/2008

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

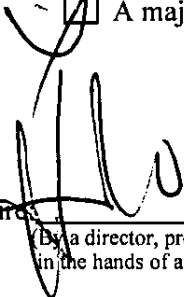
FIFTH: No debt of the corporation remains unpaid.

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.

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.)

Luisa Guido

(Typed or printed name of person signing)

President

(Title of Person Signing)

FILED
09 JAN 22 AM 11:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35