#3184 P.001/004

Page 1 of 1

## Florida Department of State

Division of Corporations
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(((H12000041194 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : AJ ACCOUNTING SERVICES, INC.

Account Number : I20110000092 Phone : (305)448-9584

Fax Number : (305)448-9569

12 FEB 27 AM 9: 36
SECRELARY OF STATE
TABLESSEE, FLORID

## DISSOLUTION OR WITHDRAWAL JACO STATEWIDE INC.

Certificate of Status	0
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Page Count	04
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FEB 2 8 2012

**EXAMINER** 

## **COVER LETTER**

TO: Amendment Section	
Division of Corporat	ions
	; !
SUBJECT: JACO STATE	WIDE INC.
DOCUMENT NUMBER: PO	08000040834
The enclosed Articles of Dissol	ution and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
	• • •
	ZAKARIYA M. ABDO
\ <u>\</u>	(Name of Contact Person)
•	JACO STATEWIDE INC.
	(Firm/Company)
10821	SNAPPER CREEK DR.
· · · · · · · · · · · · · · · · · · ·	(Address)
	MIAMI, FL 33173
	(City/State and Zip Code)
For further information concern	ing this matter, please call:
ZAKARIYA M. ABDO	at ( 305 ) 710-4447
(Name of Contact Per	son) (Area Code & Daytime Telephone Number)
Enclosed is a check for the follo	wing amount:
▼\$35 Filing Fee \$43.75 Fil Certificate	ing Fee & \$\Bigsquare \\$43.75 \text{ Filing Fee & }\Bigsquare \\$52.50 \text{ Filing Fee,} \\ of Status & Certified Copy & Certificate of Status & Certified Copy \\ enclosed) & (Additional copy is \\ enclosed) & (Additional copy is \\ enclosed)
MAILING ADDRESS: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section S Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

2/15/2012 2:58:50 PM PAGE: 1/001 Fax Server



February 15, 2012

FLORIDA DEPARTMENT OF STATE Division of Corporations

JACO STATEWIDE INC. 10821 SNAPPER CREEK DR. MIAMI, FL 33173

SUBJECT: JACO STATEWIDE INC.

REF: P08000040834

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must decide which one of these dissolution forms to file, you cannaot file both of them.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filling of your document, please call (850) 245-6050.

Cheryl Coulliette Regulatory Specialist II FAX Aud. #: H12000041194 Letter Number: 912A00007142

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

ARTICLES OF DISSOLUTION

of dissoluti	on:		
FIRST:	The name of the cor	poration as currently filed with the Florida Department of	of State:
	JACO STATE	WIDE INC.	
SECOND:	The document numb	er of the corporation (if known): P08000040834	<del></del>
THIRD:	The date dissolution	was authorized: 01/12/2012	
	Effective date of dis	solution if applicable: 01/12/2012	
FOURTH:	_	(no more than 90 days after dissolution tion (CHECK ONE)	nie date)
	Dissolution was was sufficient for	approved by the shareholders. The number of votes cast approval.	for dissolution
	Dissolution was	approved by the shareholders through voting groups.	
		nent must be separately provided for each voting group e in the plan to dissolve:	ntitled
	The number of votes	cast for dissolution was sufficient for approval by	SEC TALL
		(1100)	
		(voting group)	SSER Vivi
	Signature: X	So d Abdo	OF STATE E FLORIDA
		efident or other officer - if directors or officers have not been selected, by it is in the hands of a receiver, trustee, or other court appointed fiduciary, by	
	Z	ZAKARIYA M. ABDO	•
	(T	yped or printed name of person signing)	
		PRESIDENT	
		(Title of person signing)	
		Filing Fee: \$35	

27 AM 9: