P08000043398

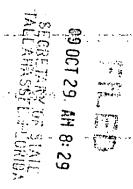
(Requestor's Name)
(Address)
(Address)
,
(City/State/Zip/Phone #)
(Only/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





600162196226

10/29/09--51010--005 **35.00



C.COULLIETTE

OCT 3 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: FOUR SEASONS PEST SOLUTIONS INC		
DOCUMENT NUMBER: P08000043398		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
MICHAEL V. WHITE		
(Name of Contact Person)		
SELF		
(Firm/Company)		
410 LAUREL PARK PLACE		
(Address)		
SEFFNER, FL 33584		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
MICHAEL V. WHITE at (813) 681-1640		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
▼\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)		
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:
	FOUR SEASONS PEST SOLUTIONS INC
SECOND:	The document number of the corporation (if known): P08000043398
THIRD:	The date dissolution was authorized: 10/23/09
	Effective date of dissolution <u>if applicable:</u> 10/23/09 (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.
	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)
	MICHAEL V WHITE
	(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.

ame of Corporation: FOUR SEASONS PEST SOLUTIONS INC
tate of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
escription of information that must be included in a claim:
NAME, ADDRESS, AND CONTACT INFORMATION OF CLAIMANT AND
A SPECIFIC DESCRIPTION OF THE NATURE OF THE CLAIM.
failing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
MICHAEL V WHITE
410 LAUREL PARK PLACE
SEFFNER, FL 33584
claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced ithin 4 years after the filing of this notice.
A
MICHAEL V WHITE / Michael V. White
Printed Name of the Person Filing Signature of the Person Filing

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