

FROM : LAZARUS
Division of Corporations

Fax No : 3052201440

Jun. 04 2009 12:43 PM P1
<https://enic.sunbiz.org/scripts/eniccovr.exe>

P080000767245

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000135949 3)))



H090001359493ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

FILED
09 JUN -4 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISSOLUTION OR WITHDRAWAL

MAXON ROOFING SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED
2009 JUN -4 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FROM : LAZARUS
JUN 04 2009 02:44PM P2

FAX NO. : 3052201440

Jun. 04 2009 02:44PM P2

FROM : LAZARUS

H09000135949

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:

MAXON ROOFING SERVICES INC.

SECOND: The document number of the corporation (if known): P08000076726

THIRD: The date dissolution was authorized: JUNE 4, 2009

Effective date of dissolution if applicable: _____

(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)

WILLIAM D. GONZALEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

H09000135949

FILED
09 JUN -4 AM 11:34
SECRETARY OF STATE
TALLAHASSEE FLORIDA