## Porms47/

(Requestor's Name)  (Address)	000174118280
(City/State/Zip/Phone #)	04/07/1001010007 **43.75
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	2010 APR -7 AM 8: 43  TATELLE D  TATELLE D

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
Division of Corporations		
SUBJECT: LONDSCLPING	for less ine	
DOCUMENT NUMBER: OOL		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning	this matter to the following:	
	NAKAMURD	
(Name of C	Contact Person)	
(Firm	n/Company)	
	JW 3st.	
(/		
Plantat		
(City/Sta	te and Zip Code)	
For further information concerning this mat	ter, please call:	
MDEIA: NAKDMIRD	at (954) 5889323	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
□\$35 Filing Fee <b>▼\$43.75</b> Filing Fee &	\$43.75 Filing Fee & \$\infty\$\$\$ \$52.50 Filing Fee,	
Certificate of Status	Certified Copy Certificate of Status &	
	(Additional copy is Certified Copy enclosed) (Additional copy is	
	enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## 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 S	State:	
	LANDS.CDPING. FOR LESS INC.		
SECOND:	The document number of the corporation (if known): PD90005427/		
THIRD:	The file date of the articles of incorporation: 06/23/2007.		
FOURTH:	(CHECK AT LEAST ONE BOX)		
	None of the corporation's shares have been issued.	·•	
	The corporation has not commenced business.	<b>五</b>	2010 AF
FIFTH:	No debt of the corporation remains unpaid.	Z.	70 - /
SIXTH:	The net assets of the corporation remaining after winding up have been distribut to the shareholders, if shares were issued.	ed ::	An o
SEVENTH:	: Adoption of Dissolution (CHECK ONE)		ç
	A majority of the incorporators authorized the dissolution.		
	A majority of the directors authorized the dissolution.		
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incorp in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)  APCIN NATAMURA  (Typed or printed name of person signing)	porator - i	if
	(Title of Person Signing)		

Filing Fee: \$35

## Pursuant to fotice of Corporate Dissolution of dissolution

This notice is s against this cor	dissolved corporation named below for resolution of payment of unknown claims pvided in s. 607.1407, F.S.
This "Notice of	. Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corpora	LANDSCAPING FOR less.
Date of dissolution specified in the Arti	will be the date the dissolution is filed with the Department of State or as cless of Dissolution.
Description of infor	mation that must be included in a claim:
-	
Mailing address who	ere claims can be sent: (Claims cannot be sent to the Division of Corporations)
コ	539 NW 35T plantation A 33317_
	· · · · · · · · · · · · · · · · · · ·
<del></del>	
A claim against the within 4 years after	above named corporation will be barred unless a proceeding to enforce the claim is commenced the filing of this notice.
<b>.</b>	and the same of th
MR C	inted Name of the Person Filing  **Signature of the Person Filing**