# P09000076598

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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(Document Number)	
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08/13/10--01011--026 \*\*43.85





## **COVER LETTER**

Division of Corporations	
SUBJECT: RAINBOW SERVICES USA	INC
DOCUMENT NUMBER: P09000076	6598
The enclosed Articles of Dissolution	and fee are submitted for filing.
Please return all correspondence con-	cerning this matter to the following:
MIKE TURBAY	
(Name of	f Contact Person)
KOMPARE INSURANCE INC	
(Firm	n/Company)
204 SW 57TH AVE	
(,	Address)
MIAMI, FL 33144	
(City/Sta	te and Zip Code)
For further information concerning this	s matter, please call:
MIKE TURBAY	at (305) 262-4053
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following	amount:
\$35 Filing Fee \$43.75 Filing F Certificate of S	

### **MAILING ADDRESS:**

TO:

**Amendment Section** 

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

# **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 S		
	RAINBOW SERVICES USA INC		
SECOND:	The document number of the corporation (if known): P09000076598		
THIRD:	The date dissolution was authorized: 8/11/2010		
	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 8/11/2010		
	(Byfa 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)		
	ADRIAN F ROMA (Typed or printed name of person signing)		
	CHAIRMAN/PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35