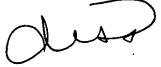
P100000002040

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: TEL AUTO CLINIC 9	TOWING Onc.
DOCUMENT NUMBER: POO 0000 ZOG	40
The enclosed Articles of Dissolution and fee are submitted	d for filing.
Please return all correspondence concerning this matter to	the following:
KENCICK BETOLA JR. (Name of Contact Person	
(Name of Contact Person)
Business Is Closes)
(Firm/Company)	
11300 NW 45th Street, (Address)	
(Address)	
CORM SPRINGS (City/State and Zip Code	CL 33065
(City/State and Zip Code	d
For further information concerning this matter, please call:	
KENNICIC BIDLA Sx. at (75) (Name of Contact Person) (Are	4) 368-7843 ra Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\sum \$43.75 Filing Fee & \$\sum \$43.75 Filing Fee & Certified Contact (Additional cenclosed)	py Certificate of Status &
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section Division of Corporations	Amendment Section Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FILED

Pursuant to of dissoluti	section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles on: 2011 APR 2015 STATE	
FIRST:	SECRETARY OF STATE SECRETARY OF	
	TEK AUTO CLINIC & TOWING, and	
SECOND:	The document number of the corporation (if known): Proposed 2040	
THIRD:	The date dissolution was authorized:	
	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	
	1	
(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)	
	KENMCK BHOLA JR. (Typed or printed name of person signing)	
	President	
(Title of person signing)		

Filing Fee: \$35