P1000088057

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DIVISION OF CORPORATION
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: DISOLUTION OF COMPANY		
D100000000		
DOCUMENT NUMBER: P10000088057		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
GARRICK J. LYNCH C/O SEMINOLE ACCOUNTANTS, INC.		
(Name of Contact Person)		
J. FIEDLER, INC.		
(Firm/Company)		
9996 SEMINOLE BLVD		
(Addre	ess)	
SEMINOLE, FL 33772		
(City/State a	nd Zip Code)	
For further information concerning this matter, please call:		
GARRICK J. LYNCH at (727) 392-2120		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
Certificate of Status (A	\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	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	State:
	J FIEDLER INC	
SECOND:	The document number of the corporation (if known): P10000088057	.
THIRD:	The date dissolution was authorized: 12/31/2011	
	Effective date of dissolution if applicable: 12/31/2011 (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 f was sufficient for approval.	or dissolution
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve:	ntitled
	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)	DIVISION OF CORPORATION OF THE SECRETARY OF STATE OF CORPORATION O
	JAMES FIEDLER	33 33
\geqslant	(Typed or printed name of person signing) Jowles & Leave	
	// (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.

Name of Corporation: J FIEDLER INC
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
NAME OF CLAIMANT DATE OF CLAIM
Date of Claim
NATURE OF CLAIM
Ament of Claim
<u> </u>
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 6452 Bonnie Bay Cirole Dinellar Pank FL 3378/
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
JAMES FIEDLER X JONUS C JUN V
Printed Name of the Person Filing //Signature of the Person Filing