

P12000018655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

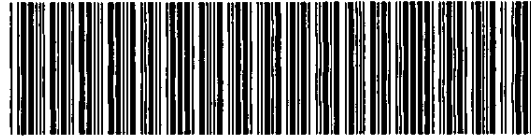
(Document Number)

Certified Copies _____ Certificates of Status _____

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15 SEP -2 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Validis

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 20, 2015

TROY R. LOTANE
CLERICAL SUPPORT SERVICES INC.
1980 MICHIGAN AVE.
COCOA, FL 32922

SUBJECT: CLERICAL SUPPORT SERVICES INC.
Ref. Number: P12000018655

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist III

Letter Number: 715A00017657

RECEIVED
15 SEP -2 PM 1:30
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2015

RECEIVED

CHRISTOPHER T. LOTANE
CLERICAL SUPPORT SERVICES INC.
1980 MICHIGAN AVE.
COCOA, FL 32922

SUBJECT: CLERICAL SUPPORT SERVICES INC.
Ref. Number: P12000018655

We have received your document for CLERICAL SUPPORT SERVICES INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist III

Letter Number: 215A00015772

RECEIVED
15 AUG 19 AM 11:28

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Clerical Support Services, Inc.

DOCUMENT NUMBER: P12000018655

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christopher T. Lotane

(Name of Contact Person)

Clerical Support Services Inc.

(Firm/Company)

1980 Michigan Avenue

(Address)

Cocoa, Florida 32922

(City/State and Zip Code)

For further information concerning this matter, please call:

Troy R. Lotane

at (321)-636-4861 X 116

(Name of Contact Person)

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:

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 State:
Clerical Support Services, Inc.

SECOND: The document number of the corporation (if known): P12000018655

THIRD: The date dissolution was authorized: 12-15-2014

Effective date of dissolution if applicable: _____

(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

Christopher T. Lotane

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
15 SEP -2 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA