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| Special Instructions to | Filing Officer: | |
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R. WHITE

COVER LETTER

| TO: Amendment Section Division of Corporations | | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| SUBJECT: C & J COMPLETE SERVICES, CORP | | | |
| DOCUMENT NUMBER: P12000026105 | | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | | |
| Please return all correspondence concerning this matter to the following: | | | |
| JHON RODRIGUEZ | | | |
| (Name of Contact Person) | | | |
| JIREH MULTISERVICES INC | | | |
| (Firm/Company) | | | |
| 3095 S MILITARY TRAIL # 4 | | | |
| (Address) | | | |
| LAKE WORTH FL 33463 | | | |
| (City/State and Zip Code) | | | |
| For further information concerning this matter, please call: | | | |
| JHON RODRIGUEZ at (561) 5749110 | | | |
| (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 Certificate of Status Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) | | | |

STREET ADDRESS:

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

MAILING ADDRESS:

Division of Corporations

Tallahassee, FL 32314

Amendment Section

P.O. Box 6327

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: C & J COMPLETE SERVICES, CORP |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SECOND: | The document number of the corporation (if known): P12000026105 |
| THIRD: | The date dissolution was authorized: 10/31/2014 |
| | Effective date of dissolution if applicable: 10/31/2014 (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: |
| h. | (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) |
| | CESAR A LEMUS |
| • | (Typed or printed name of person signing) |
| | DIRECTOR |
| - | (Title of person signing) |

Filing Fee: \$35

Notice of Corporate Dissolution

| This notice is submitted by | the dissolved corporation | named below f | or resolution of | f payment of t | ınknown c | laims |
|-------------------------------|---------------------------|---------------|------------------|----------------|-----------|-------|
| against this corporation as p | | | | | | |

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

| Name of Corp | oration: C & J COMPLETE SE | RVICES, CORP | |
|----------------|--------------------------------------------------------------------------------|------------------------------------------|--------------|
| | ation will be the date the dissolution is filed wite Articles of Dissolution. | th the Department of State or as | |
| Description of | information that must be included in a claim: | | |
| N/A | • | • | |
| | | 1-41,00 | |
| | | | · |
| ···· | | | |
| | | | |
| Mailing addres | ss where claims can be sent: (Claims cannot be | sent to the Division of Corporations) | · |
| | WEST PALM BEACH, FL | 33415 | |
| | | | |
| | | | |
| | | | |
| | t the above named corporation will be barred uafter the filing of this notice. | inless a proceeding to enforce the claim | is commenced |
| CESAR A | A LEMUS | But | • |
| | Printed Name of the Person Filing | Signature of the Person Filing | <u></u> |

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00