Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000009298 3)))



HISTOTOTOTO PROBLEM

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 12000000019

: 120000000013

Phone

(305)552-5973

Fax Number

: (305)675-5944

DISSOLUTION OR WITHDRAWAL SYNERGY PROTECTIVE SERVICES, INC

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$35.00	

5 JAN 12 PH 5:0

Electronic Filing Menu

Corporate Filing Menu

Help

-13-1=

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:	
-	SYNERGY PROTECTIVE S	ERVICE	=
SECOND:	The document number of the corporation (if known): PI30600	13229	
THIRD:	The date dissolution was authorized: 01-12-15		
	Effective date of dissolution if applicable: (no more than 90 days after dissolution)	on file date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
,	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissolution	t
	Dissolution was approved by the shareholders through voting groups.		
S	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by	1	
		्राध्य ज	
	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). (Typed or printed name of person signing)	JAN 12 PH 4: 01	
*	PRESIDENT		
	(Title of person signing)		

Filing Fee: \$35