## P14000032161

(Re	equestor's Name)		
(Ad	dress)		
(Ad	ldress)		
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SECRETARY OF STATE
DIVISION OF CORPORATIONS

ONLY APP - 7 - PM S. L.

AND 135 10 419115

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Corporate Dissol	lution	
DOCUMENT NUMBER: P14000	032161	
The enclosed Articles of Dissolution and for	ee are submitted for fili	ng.
Please return all correspondence concerning	g this matter to the follo	owing:
Abner Noel, Jr		
(Name of	Contact Person)	
Supremecutforless Law	ncare Servic	e Inc
(Firm	n/Company)	
3510 Shadow St		
(A	ddress)	
Jacksonville, FL 32254		
(City/Sta	te and Zip Code)	
For further information concerning this man	tter, please call:	
Abner Noel, Jr	at (904)	881-6372
(Name of Contact Person)	(Area Code	& Daytime Telephone Number)
Enclosed is a check for the following amou	nt:	
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Am Div Cli	REET ADDRESS: nendment Section vision of Corporations fton Building 11 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 Supremecutforless Lawncare Service Inc	State:			
SECOND:	The document number of the corporation (if known): P14000032161				
THIRD:	The date dissolution was authorized: 12/31/2014  Effective date of dissolution if applicable: 12/31/2014  (no more than 90 days after dissolution file date)				
FOURTH:	<ul> <li>Adoption of Dissolution (CHECK ONE)</li> <li>Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.</li> <li>Dissolution was approved by the shareholders through voting groups.</li> <li>The following statement must be separately provided for each voting group et to vote separately on the plan to dissolve:</li> <li>The number of votes cast for dissolution was sufficient for approval by</li> </ul>	for diss	olution SECF DIVISIO		
	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)  Abner Noel, Jr  (Typed or printed name of person signing)	7 -7 PH 3:40	ETARY OF STATE		
	President (Title of person signing)				

Filing Fee: \$35