P1400089782

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UI	P WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
<u> </u>	

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SEP 1 0 2015 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT:	NS INC
DOCUMENT NUMBER: P14000089782	<u> </u>
The enclosed Articles of Dissolution and	fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
LAURYN CHARLES	
(Name o	of Contact Person)
ACCOUNTABLE FINANCIAL SERVICES GR	OUP INC.
(F)	irm/Company)
660 E HILLSBORO BLVD., SUITE 105	
((Address)
DEERFIELD BEACH, FL 33441	
(City/S	tate and Zip Code)
For further information concerning this n	natter, please call:
LAURYN CHARLES	at ((Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amo	ount:
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	
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: DEERFIELD BEACH SOLUTIONS INC
SECOND:	The document number of the corporation (if known): P14000089182
THIRD:	The date dissolution was authorized:08/01/2016
	Effective date of dissolution <u>if applicable:</u> 08/31/2016 (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 wil 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)
	DANIEL FRAZER
	(Typed or printed name of person signing)
	PRESIDENT
	(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.

DEERFIELD BEACH SOLUTIONS INC Name of Corporation:
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:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
LAURYN CHARLES
ACCOUNTABLE FINANCIAL SERVICES GROUP INC
660 E HILLSBORO BLVD., SUITE 105
DEERFIELD BEACH, FL 33441
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.

LAURYN CHARLES

Printed Name of the Person Filing

Signature of the Person Filing