P21000061916

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COVER LETTER

TO: Amendment Section Division of Corporations

JAB POWER WASHING & MORE INC	
P21000061916 DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee a	
Please return all correspondence concerning thi	s matter to the following:
JAQUAN BREVARD	
(Name of Con	tact Person)
(Firm/Co 5817 BLUEBERRY COURT	ompany)
(Addre FORT LAUDERDALE, FL 33313	ss)
(City/State ar	nd Zip Code)
For further information concerning this matter,	please call:
JAQUAN BREVARD	561-631-2509 at (
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status (A	\$43.75 Filing Fee & Sertified 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: JAB POWER WASHING & MORE INC
	P21000061916
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized:
	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:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.
S	Signature: Jaquen Brward (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)
	JAQUAN BREVARD
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)

Filing Fee: \$35