P980000587/

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
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(Document Number)	
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TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations SUBJECT: SHAWN QUACKENBUSH SWIMMING POOL SERVICE INC. **DOCUMENT NUMBER:** <u>P9</u>8000058715 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SHAWN QUACKENBUSH (Name of Contact Person) SHAWN QUACKENBUSH SWIMMING POOL SERVICE INC. (Firm/Company) 7962 KNOX LOOP (Address) **NEW PORT RICHEY FL 34655** (City/State and Zip Code) For further information concerning this matter, please call: SHAWN QUACKENBUSH (Name of Contact Person) Enclosed is a check for the following amount: **[**√]\$35 Filing Fee \$\infty\$\$\\$43.75 Filing Fee & **[**]\$43.75 Filing Fee & **[**]\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: Amendment Section **Amendment Section** Division of Corporations **Division of Corporations**

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

EID CT.	The name of the compantion of commantly filed with the Floride Demontrace of States
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	SHAWN QUACKENBUSH SWIMMING POOL SERVICE INC.
SECOND:	The document number of the corporation (if known): P98000058715
THIRD:	The date dissolution was authorized: 12/31/2010
	Effective date of dissolution <u>if applicable</u> : 12/31/2010 (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
	100% (voting group)
	(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)
	SHAWN QUACKENBUSH
	(Typed or printed name of person signing)
	PREISENT
	(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.

Name of Corp	poration: SHAWN QUACKENBUSH SWIMMING POOL SERVICE INC.
	ution will be the date the dissolution is filed with the Department of State or as the Articles of Dissolution.
Description o	f information that must be included in a claim:
N/A	•
Mailing addre	ess where claims can be sent: (Claims cannot be sent to the Division of Corporations)
	7962 KNOX LOOP
	NEW PORT RICHEY FL 34655
	st the above named corporation will be barred unless a proceeding to enforce the claim is commenced after the filing of this notice.
SHAWN	QUACKENBUSH
	Printed Name of the Person Filing Signature of the Person Filing

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