P9900064575

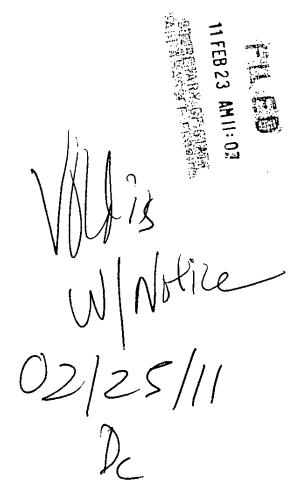
| (Re | questor's Name) | | |
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| PICK-UP | TIAW | MAIL | |
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| (Document Number) | | | |
| Certified Copies | _ Certificates | of Status | |
| Special Instructions to | Filing Officer: | | |
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Office Use Only



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February 14, 2011

IMMA COLATA ZOTLOLI SUNSCAPE SERVICES, INC. P. O. BOX 1348 LOXAHATCHEE, FL 33470

SUBJECT: SUNSCAPE SERVICES, INC.

Ref. Number: P99000064575

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state either: (1) None of the corporation's shares have been issued OR (2) The corporation did not commence business.

PLEASE COMPLETE ONLY ONE BOX ON SECTION SEVENTH.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 711A00003752

COVER LETTER

| Division of Corporations | |
|--|--------------------------------------|
| SUBJECT: DISSOlution | |
| DOCUMENT NUMBER: <u>P99000664575</u> | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | |
| Imma colata Zottoli | |
| (Name of Contact Person) | |
| Sunscape Services, Inc. | |
| (Firm/Company) | |
| 7.0.Box 1348 (Address) | |
| (Address) | |
| Loxahatchee, FL 33470 | |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | |
| Immacolata Zotholi at (50) 793- (Name of Contact Person) (Area Code & Daytime) | |
| Enclosed is a check for the following amount: | |
| (Additional copy is Certifie | ate of Status & od Copy onal copy is |
| MAILING ADDRESS:STREET ADDRAmendment SectionAmendment SecDivision of CorporationsDivision of CorP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive | ction porations g |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

| FIRST: | The name of the corporation as currently filed with the Florida Departme | nt of St | ate: | |
|----------|--|------------|--|----------|
| | Sunscape Services, Inc. | | | |
| SECOND: | The document number of the corporation (if known): P995000 | 164 | 57 | 5 |
| THIRD: | The file date of the articles of incorporation: 7/14/99 | | | |
| FOURTH: | (CHECK AT LEAST ONE BOX) | | | |
| | None of the corporation's shares have been issued. | | | |
| | The corporation has not commenced business. | | | |
| FIFTH: | No debt of the corporation remains unpaid. | | | |
| SIXTH: | The net assets of the corporation remaining after winding up have been disto the shareholders, if shares were issued. | stributed | d | |
| SEVENTH: | Adoption of Dissolution (CHECK ONE) | | = | |
| PM (I | A majority of the incorporators authorized the dissolution. | | FEB 2 | 7 |
| | A majority of the directors authorized the dissolution. | | 3 | in annie |
| | | | ====================================== | |
| | | | Ē0 | , |
| Sign | ature: X Ammacolate Sottoli' | | | |
| | (By a director president or other officer - if directors or officers have not been selected, by a in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) | n incorpor | ator - if | |
| | TMMACO/Ata Zottoli (Typed or printed name of person signing) | | | |
| | (Typed or printed name of person signing) | | | |
| | (President (Title of Person Signing) | | | |
| | (The of Felson 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 Corporation: Sunscape Services, Inc, 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: Corporation is dissolved as of 12/31 Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Sunscape Services, Inc. P.O. Box 1348 Loxabatcher FL 33470 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.

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