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Office Use Only



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SECRETARY OF STATE
TALLAHASSEF, FI ORIGIN.

D. 22

B 1-28-11

COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations

SUBJECT:
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
John M Harper IR. (Name of Contact Person)
(Name of Contact Person) J. B. H. SERVICES INC. (Firm/Company)
22 AUALON DR. (Address) Palm Coast Florida. 32137 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (386) 447-5805 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigs\square \text{\$43.75 Filing Fee & \$\bigs\square \text{\$43.75 Filing Fee & \$\bigs\square \text{\$52.50 Filing Fee, } \\ Certificate of Status & Certificate of Status & Certified Copy &
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision 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:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	TBH SERVICES, INC
SECOND:	The document number of the corporation (if known): 199000074164
THIRD:	The date dissolution was authorized:
	Effective date of dissolution if applicable: (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
	(voting group)
	ASS TO THE
	00 1 0
	Signature: (By a director, physident or other office) - if directors or officers have not been selected, by
	an incorporator of in the hands of a receiver, trustee or other court appointed fiduciary, by that fiduciary)
	to me blooming to
	(Typed or printed name of person signing)
	Tresident
	(Title of person signing)

Filing Fee: \$35