

# P99000082137

BASIC ACCOUNTING SERVICES INC.

Requestor's Name  
692 W. 29 St. Ste #9

Address  
Hialeah Florida 33012

City State Zip  
305 887 4185

Phone#

100003440641--2

-10/26/00--01067--008

\*\*\*\*\*35.00 \*\*\*\*\*35.00

CORPORATION NAME

Complete Delivery Fee

( ) PROFIT CORPORATION ( ) NON PROFIT CORPORATION

( ) LIMITED PARTNERSHIP ( ) ANNUAL REPORT ( ) RESERVATION

( ) REINSTATEMENT (X) OTHER *Dissolution*

( ) CERTIFIED COPY ( ) PHOTO COPIES ( ) CERTIFICATE  
UNDER SEAL

( ) WALK IN ( ) WILL WAIT ( ) MAIL OUT ( ) CALL ( ) AFTER 30

Name  
Availability

Document  
Examiner

Updater

Updater  
Verifier

Acknowledgment

W.P. Verifier

FILED  
00 OCT 26 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T BROWN NOV - 3 2000

## ARTICLES OF DISSOLUTION

FILED  
00 OCT 26 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: \_\_\_\_\_

COMPLETE DELIVERY INC.

SECOND: The date dissolution was authorized: 10-15-00

THIRD: 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 vote of the shareholders through voting groups.

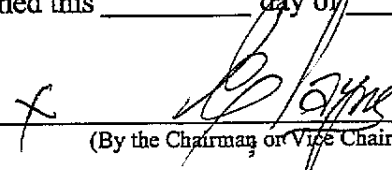
*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signed this 24 th. day of October, 2000

Signature

  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Eleyne M. Perez

\_\_\_\_\_  
(Typed or printed name)

Director/ President, Sec. & Treasurer

\_\_\_\_\_  
(Title)