

P99000082322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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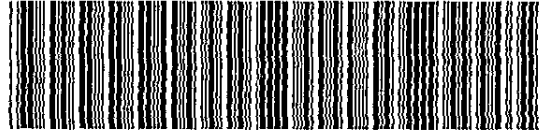
(Business Entity Name)

(Document Number)

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400061473554

11/17/05--01031--012 \*\*35.00

**EFFECTIVE DATE**

12-31-05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

05 NOV 17 AM 10:54

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4 Vol.

**COVER LETTER**

**TO:** Amendment Section  
• Division of Corporations

**SUBJECT:** M&P Mobile Auto Detailing & Pressure Washing, Inc.

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patrick Boykin

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

17023 Florence View Drive

\_\_\_\_\_  
(Address)

Montverde, FL 34756

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Amy S. Zellmer

\_\_\_\_\_  
(Name of Contact Person)

at ( 414 ) 427-4910

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## 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  
M&P Mobile Auto Detailing & Pressure Washing, Inc.

SECOND: The document number of the corporation (if known): \_\_\_\_\_

THIRD: The date dissolution was authorized: 11/07/05  
Effective date of dissolution if applicable: 12/31/05  
(no more than 90 days after dissolution file date)

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STATE DEPT OF STATE  
TALLAHASSEE, FLORIDA

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 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

EFFECTIVE DATE  
12-31-05

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

Signature: Patrick Boykin

(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)

Patrick Boykin

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35