## 532134

|                         |                    | <i></i>      |
|-------------------------|--------------------|--------------|
| (Re                     | equestor's Name)   |              |
| •                       |                    |              |
| (Ad                     | dress)             |              |
|                         |                    |              |
| (Ad                     | dress)             |              |
|                         |                    |              |
| (Cil                    | ty/State/Zip/Phone | e #)         |
| •                       |                    |              |
| PICK-UP                 | WAIT               | MAIL         |
|                         |                    |              |
| (Bu                     | siness Entity Nan  | ne)          |
| . (=-                   | <b>,</b>           | ··- <b>,</b> |
|                         | cument Number)     |              |
| (50)                    | , camoni (ambon    |              |
| Contilled Coning        | Cartificator       | of Status    |
| Certified Copies        | Certificates       | o o status   |
|                         |                    |              |
| Special Instructions to | Filing Officer:    |              |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |
|                         |                    |              |
| ,                       |                    |              |
|                         |                    | ··           |

Office Use Only



900152687839

04/27/09--01047--015 \*\*35.00

EFFECTIVE DIFFE 5/1/09

FILED PH 3: 39
09 APR 27 PH 3: 39
SECRETARY OF STATE
SECRETARY OF STATE

NoLDIS DEGS 15

## **COVER LETTER**

| TO: Amendment Section Division of Corporations             |  |  |
|--|--|--|
| Division of Corporations                                   |  |  |
| SUBJECT: The Home Seller's S                               | olution, Inc.  |  |
|  |  |  |
| DOCUMENT NUMBER: S32134                                    |  |  |
| The enclosed Articles of Dissolution and fee               | e are submitted for  | r filing.  |
| Please return all correspondence concerning                | this matter to the   | following:   |
| Michel L. Moffit   | ,  |  |
| (Name of C   | ontact Person)   |  |
| The Home Seller's Solution, I                              | nc.  |  |
|  | Company)   |  |
| 8603 Bay View Court  |  | · .  |
| (Add   | dress)   |  |
| Orlando, FL 32836-6309                                     |  |  |
| (City/State  | and Zip Code)  |  |
| For further information concerning this matter             | er, please call:   |  |
| Michel L. Moffit   | at ( 407   | 760-7603   |
| (Name of Contact Person)                                   | (Area C  | ode & Daytime Telephone Number)  |
| Enclosed is a check for the following amoun                | t:   |  |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing F Certified Copy (Additional copy enclosed) | cee & \$\int \\$52.50 \text{ Filing Fee,} \\ Certificate of \text{Status &} \\ Certified \text{Copy} \\ (\text{Additional copy is enclosed)} |
| MAILING ADDRESS: Amendment Section                         |  | STREET ADDRESS: Amendment Section  |
| Division of Corporations                                   |  | Division of Corporations   |
| P.O. Box 6327<br>Tallahassee, FL 32314                     |  | 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   | of State:              |                 |
|---------|---|------------------------|-----------------|
|         | The Home Seller's Solution, Inc.  |                        |                 |
| SECOND: | The document number of the corporation (if known): \$32134  | . ,                    |                 |
| THIRD:  | The date dissolution was authorized: 04/08/2009   |                        |                 |
|         | Effective date of dissolution <u>if applicable</u> : 05/01/2009  (no more than 90 days after dissolution  | n file date)           |                 |
| FOURTH: | Adoption of Dissolution (CHECK ONE)   |                        |                 |
|         | Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.   | for disso              | olution         |
|         | Dissolution was approved by the shareholders through voting groups.   |                        |                 |
|         | The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:  | entilled<br>ALEC       | 09 /            |
|         | The number of votes cast for dissolution was sufficient for approval by   | RETARY<br>AHASSE       | 09 APR 27       |
|         | (voting group)  | OF STATE<br>E. FLORIDA | <b>PH</b> 3: 39 |
|         | 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) |                        |                 |
|         | Michel L. Moffit  |                        |                 |
|         | (Typed or printed name of person signing)   |                        |                 |
|         | President   |                        |                 |
|         | (Title of person signing)   |                        |                 |

Filing Fee: \$35