

P04000063235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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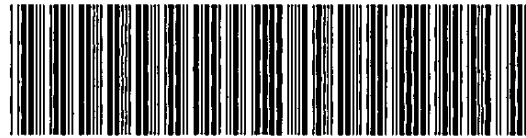
(Business Entity Name)

(Document Number)

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*SJL*

06 SEP 19 PM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

COVER LETTER

TO: Amendment Section  
Division of Corporations

\* Tax ID 20-1062694

SUBJECT: Dissolution of Corporation - Brown and Horvath, Associates, Inc.

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

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

Please return all correspondence concerning this matter to the following:

Dr. Judith Horvath  
(Name of Contact Person)

Brown and Horvath Associates, Inc.  
(Firm/Company)

8807 Wild Dunes Drive  
(Address)

Sarasota, FL 34241  
(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Judith Horvath at ( 813 ) 785-4459  
(Name of Contact Person) (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

Brown and Horvath Associates, Inc.

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

PO4000063235

THIRD: The date dissolution was authorized:

May 4, 2006

Effective date of dissolution if applicable:

May 8, 2006

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

[X] 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

President & Vice President (voting group)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Signature:

[Handwritten 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)

Judith A. Horvath, PhD

(Typed or printed name of person signing)

Vice President

(Title of person signing)

Filing Fee: \$35