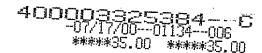
## L 83448

July 13, 2000

Fla Department of State Divisions of Corporations PO Box 6327 Tallahassee Florida 32314



Dear Sir or Madam:

My husband and I sold our business (Pride Pest Control. Inc) on September 1, 1999 due to my husband's failing health.

Please find attached the Articles of Dissolution form that I have completed.

I spoke with a representative named Louise who was kind enough to assist me. She said to attach a check for \$35.00 and submit it with the form. I will be getting an acknowledgment to the dissolution of our business, and, I need not do ANYTHING pertaining to the 2000 UNIFORM BUSINESS REPORT because of this dissolutionment. I apologize for this lateness, but quite honestly I thought my husband completed this project, and, he thought I did.

Should you have any questions – or- I have incorrectly completed the dissolution form or I misunderstood Louise, please contact me in writing at my home: 1934 Pia Court, Apopka Florida 32703 or you may call me at my office. My employment is with The Orlando Surgery Center and my office number is 407-897-2000 ext. 142.

Very truly yours,

Joanne Gittleman

T. LEWIS JIII 2 4 2000

## ARTICLES OF DISSOLUTION

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation is: FIRST: The filing date of the articles of incorporation was: SECOND: THIRD: (CHECK ONE) ☐ None of the corporation's shares have been issued. The corporation has not commenced business. FOURTH: No debt of the corporation remains unpaid. FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. Adoption of Dissolution (CHECK ONE) SIXTH: ☐ A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. Signature( (By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)