WY0000850

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|-----------------------------------------|--|--|--|
| (Requestor's Name) | | | |
| (Address) | | | |
| (Address) | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| (Business Entity Name) | | | |
| . (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | |
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Office Use Only



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COVER LETTER

SUBJECT: First Defense Abstinence Education, Inc. DOCUMENT NUMBER: N0400000850 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Marianne Ball (Name of Contact Person) First Defense Abstinence Education, Inc. (Firm/Company) 1680 Clover Circle (Address) Melbourne, FL 32935 (City/State and Zip Code) For further information concerning this matter, please call: Marianne Ball (Area Code & DaytimeTelephone Number) · (Name of Contact Person) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ▼\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed)

MAILING ADDRESS:

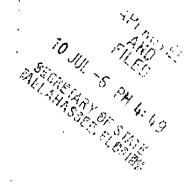
TO: Amendment Section

Division of Corporations

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 se Articles of Di | ection 617.1403, Florida Statutes, this Florida not for profit c assolution: | orporation submits the following | |
|----------------------------------|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------|--|
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: | | |
| | First Defense Abstinence Education, Inc. | <u> </u> | |
| SECOND: | The document number of the corporation (if known): N0400000850 | | |
| THIRD: | Adoption of Dissolution (COMPLETE SECTION I OR II) | · | |
| | SECTION I If the corporation has members entitled to vote: | | |
| | (CHECK/COMPLETE ONE) | • | |
| | The date of the meeting of members at which the resolution to dissolve was adopted | | |
| | 10/31/2009 members was sufficient for approval. | The number of votes cast by the | |
| | The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. | | |
| | SECTION II If the corporation has no members or members entitled to vote on the dissolution: | | |
| | The corporation has no members or members entitled to vote on the dissolution. | | |
| | The date of adoption of the resolution by the board of directors was | | |
| | The number of directors in office was and th | e vote for resolution was | |

against. (must be a majority vote)

FOURTH:

Effective date of dissolution if applicable: 07/01/2010

(no more than 90 days after dissolution file date)

Signature

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Paul Hanson

(Typed or printed name of the person signing)

Chairman, Board of Directors

(Title of person signing)

FILING FEE: \$35