N0500000502

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

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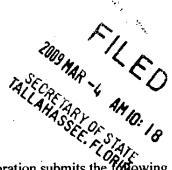
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: <u>Uasing of Non Con</u>	nmoncod Non-Profit Organization
DOCUMENT NUMBER: NO 50000	
The enclosed Articles of Dissolution and fee ar	e submitted for filing.
Please return all correspondence concerning this	s matter to the following:
<u>Lissette Perry</u>	
(Name of Co	entact Person)
Lissette Perry (Name of Co	Exploitation
800 Colston Roa	
(Add	
Marietta Ga. 300	064
(City/State ar	nd Zip Code)
For further information concerning this matter,	please call:
Lissette Perry	at (678) 594.7444
(Name of Contact Person)	(Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigcap \\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$\ \tag{\$52.50 Filing Fee,} \\ \text{Certificate of Status & Certificate Opy enclosed} \tag{\$Additional copy is enclosed} \tag{\$Additional copy is enclosed} \tag{\$52.50 Filing Fee,} \\ \text{Certificate of Status & Certified Copy enclosed} \tag{\$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 617.1403, Florida Statutes, this Florida not for profit corporation submits the for profit corporation submits the formula of the formul Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: People Against Child Exploitation, Inc. The document number of the corporation (if known): N0500000502 SECOND: 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 12-30-08 . The number of votes cast by the members was sufficient for approval. 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 the vote for resolution was

for and against. (must be a majority vote)

Effective date of dissolution <u>if applicable</u> :	1/1/09 (no more than 90 days after dissolution file date)
Signature AWAUL PUW (By the chairman or vice chairman or officer- if directors have not been self the hands of a receiver, trustee, or oth by that fiduciary.)	ected, by an incorporator- if in
CTyped or printed name of the control of the contro	

FOURTH:

FILING FEE: \$35