## N08000005947

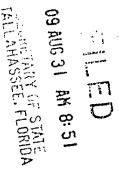
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Voldis Neuro 9-1-09

## **COVER LETTER**

**TO:** Amendment Section

**Division of Corporations** 

SUBJECT: Hands for Auge Ch	emo Brain Foundation			
DOCUMENT NUMBER: <u>NO8 ()00005947</u>				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Michila Stoma				
Michel Sloma (Name of Contact Person)  7 Levals for Kupe Chemo Brain (Firm/Company)	Foundtion Inc.			
608 24th Que W.				
(Firm/Company)  608 24th One W.  (Address)  St. Letusling, F. 33704  (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Muchele Sloma at (727) (Name of Contact Person) (Area Cod	368-8384 e & DaytimeTelephone Number)			
Enclosed is a check for the following amount:				
Certificate of Status Certified Copy (Additional control of Status)  What Control of Status Certified Copy (Additional control of Status)  What Certified Copy (Additional control of Status)  What Certified Copy (Additional control of Status)  What Copy (Additional control of Status)	Certificate of Status &			
MAILING ADDRESS:  Amendment Section  A	STREET ADDRESS:			
	Amendment Section Division of Corporations			
	Clifton Building			
	661 Executive Center Circle allahassee, FL 32301			



## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2009

MICHELE SLOMA HANDS FOR HOPE CHEMOBRAIN FOUNDATION 608 24TH AVENUE WEST ST. PETERSBURG, FL 33704

SUBJECT: HANDS FOR HOPE CHEMOBRAIN FOUNDATION, INC.

Ref. Number: N08000005947

We have received your document for HANDS FOR HOPE CHEMOBRAIN FOUNDATION, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 809A00028458

RECRETARY OF STATE



## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Hands for Hope Chemoprain Toundation, Inc
SECOND:	The document number of the corporation (if known): NO800005947
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
	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 8/11/09 encor
	The number of directors in office was and the vote for resolution was
	for and against. (must be a majority vote)
ل	erra ms errar ms

FOURTH:	Effective date of dissolution if applicable:	8/17/09
		(no more than 90 days after dissolution file date)
	Signature Michele &	(loma)
	(By the chairman or vice chairman of	
	officer- if directors have not been sele	
	the hands of a receiver, trustee, or oth by that fiduciary.)	ег соин арронней пиислагу,
		^
	Michele S/	oma
	(Typed or printed name of t	he person signing)
	resident	
	(Title of person si	igning)

FILING FEE: \$35