0900009819

(Requestor's Name)	
(Address)	300208198
(Address)	
(City/State/Zip/Phone #)	
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COVER LETTER

TO: Amendment Section Division of Corporations	*
SUBJECT: Abdicles of Dissolu	tion
DOCUMENT NUMBER: N09000009819	}
The enclosed Articles of Dissolution and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the	following:
MIRINE DYE	
(Name of Contact Person)	
PREVENTION WORK. (Firm/Company)	5
(Firm/Company)	
134 HARboe Da	
(Address)	
TAVERNIER, FI 33070	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Migine VE at (305) (Name of Contact Person) (Area Contact Person)	S52-360 (Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	,
·	—
✓\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy enclosed)	Certificate of Status &
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section
Amendment Section Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building ' 2661 Executive Center Circle
Tallahassee, FL 32314	Tallahassee, FL 32301



August 20, 2011

Re: Dissolution of Prevention Works Inc.

To whom it may concern,

I am trying to handle this for my wife. She claims she filed paper work at the end of 2010. She apparently sent the wrong documents. The corporation never conducted any business or received any funds, and was considered dissolved as of December 31 2010. The document I am sending instructs me not to date more than 90 days after dissolution date. Please help. I can be reached at 305-259-5500. Thank you so much for any help.

Sincerely

John P Dye (J.P.)

COVER LETTER

TO: Amendment Section
Division of Corporations
SUBJECT: Dissolution
DOCUMENT NUMBER: UNKNOWN
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Firm/Company)
(Firm/Company)
13110 South DixIE Hay
(Address)
(Firm/Company) 13110 South DixiE Hay (Address) Mi'Ami: F(33156
(City/State and Zip Code)
For further information concerning this matter, please call:
John P. D.E #1805) 259-5500
John P. JE at (305) 259-5500 (Name of Contact Person) (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, \$\bigcom \text{Certificate of Status & Certified Copy (Additional copy is enclosed)}\$\$ 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 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:
	Prevention Works Inc.
SECOND:	The document number of the corporation (if known): 10900009819
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 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 12/31/10.
	The number of directors in office was and the vote for resolution was
	for and against. (must be a majority vote)

(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.)
Mirine R. Dye (Typed or printed name of the person signing)
(Title of person signing)

FILING FEE: \$35

Effective date of dissolution if applicable:

FOURTH: