N98000003976

Daniel (Re 1118 Luc Cape Con City/State	Educator's Name erne Avenue Address Address Address Phone #	<u> </u>	Office Use	e Only	
CORPORATION	NAME(S) & DOCUM	IENT NUMBER(S), (if known):		
1(Corp	poration Name)	(Document #)		I I
2(Corr	poration Name)	(Document #)		. <u>44</u> .
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4. <u>(Corr</u>	poration Name)	(Document #	<u> </u>		_
	Pick up time Will wait AMENDMENT	Photocopy	Certified Copy Certificate of St		n
Profit	Amendment		0000028910800 -06/01/9901109010 *****35.00 *****35.00		
NonProfit	Resignation of R.A.	, Officer/Director		The second second	_
Limited Liability	Change of Registere	ed Agent			
Domestication	Dissolution/V thdra	wal			
Other	Merger		-		
OTHER FILINGS Annual Report Fictitious Name	REGISTRA' QUALIFICA Foreign		FILED 99 JUN -1 PM SECRETARY OF STALLAHASSEE, FL		
Name Reservation	Timited Partnership				
1	Reinstatement			<u> </u>	
	Trademark			Ş 19	•
	Other			JUN 8 1999	
		Г	7. LEWIS Examiner's Initials	JUN 0 1777	
		D. C.	- municipal		



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 21, 1999

DANIEL C. BRENNAN 1118 LUCERNE AVE. CAPE CORAL, FL 33904

SUBJECT: SAFE HANDS INC. Ref. Number: N98000003976

We have received your document for SAFE HANDS INC., however, upon receipt of your document no check was enclosed. Please send a check or money order 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) 487-6905.

Letter Number: 899A00028180

Thelma Lewis
Corporate Specialist Supervisor

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is <u>SAFE HANCS INC.</u>	•
SECOND: The articles of incorporation were filed on	
THIRD: The corporation has not commenced to conduct its affairs.	
FOURTH: No debts of the corporation remain unpaid.	99 J SEGR TALLI
FIFTH: Adoption of dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)	FILED Jun -1 PI ARASSEE,
 The dissolution was authorized by a majority of the directors: OR The dissolution was authorized by an incorporator. 	PN 3: 19 OF STATE E, FLORIDGE
The dissolution was authorized by an incorporator. The dissolution was authorized by a majority of the incorporators.	
Signed this 15 day of May, 19	99
Signature (By the Chairman or Vice Chairman of the Board of Directors, Profficer - if Directors have not been selected by an incorporator.) ANIEL BREHMAN Typed or printed name	esident or other
INCORPORATOR Title	