N9800005432

May 23, 2001

TO WHOM IT MAY CONCERN:

On May 17, 1999 a charitable organization was formed by Dominic DeSarno by the
name of W.O.W. Inc. (Widow and Widowers) ID# 69-14-06740856-C. The expiration
date on this ID number is February 2004.

Mr. DeSarno has since passed away and the organization has been declining. We would
like to dissolve the organization and the incorporation completely.

Please let me know what we need to do or sign to accomplish this task. I have signatures
below of all the current officers, who also agree with this decision.

Should you have any questions, please feel free to give me a call at (407)322-8549. I
appreciate all your help.

Sincerely,

Minnie Kane

W.O.W. Inc.
Officers:

Florence Foster
Florence Foster – Vice President

Minnie J. Kane
Minnie Kane – Secretary
198 Heron Bay Circle
Lake Mary, FC 32746

Vee Walker
Vee Walker - Treasurer

DISS.

ms. Kane
gave ok
to correct + pay to
corp. name on check -
name

S. PAYNE   AUG 30 2001

RECEIVED 01 AUG 29 PM 12:34 DIVISION OF CORPORATIONS

01 AUG 29 PH 3:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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 ___Widows or Widowers, Inc.___

SECOND: The articles of incorporation were filed on ___9/21/98___

THIRD: The corporation has not commenced to conduct its affairs.

FOURTH: No debts of the corporation remain unpaid.

FIFTH: Adoption of dissolution **(CHECK ONE)**
(Note: Cannot be authorized by an incorporator if the corporation has directors)

☐ The dissolution was authorized by a majority of the directors:
OR

☐ The dissolution was authorized by an incorporator.

☒ The dissolution was authorized by a majority of the incorporators.

Signed this ___9th___ day of ___July___ , ~~19~~ ___2001___ .

Signature___Minnie F. Kane___
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer - if Directors have not been selected by an incorporator.)

___MiNNiE F. KANE___
Typed or printed name

___Secretary___
Title

STATE OF FLORIDA
COUNTY OF ORANGE

This foregoing instrument was acknowledged before me this 9th day of July, 2001 by Minnie F. Kane, who is personally known to me.

___Brenda K. Murray___
Notary Public

01 AUG 29 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA