N9900005459

(Re	equestor's Name)	
(A	ddress)	<u></u>
(A	ddress)	
(C	ity/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer.		
:		





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08/11/16--01008--023 **35.00

SECRETARY OF STATE

SHARSSEF, FLORIDA

8/23/16

COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: Dissolution of Corporation		<u> </u>	
DOCUMENT NUMBER: N99000005459		- "	
The enclosed Articles of Dissolution and fee an	re submitted fo	or filing.	
Please return all correspondence concerning thi	s matter to the	followin	g:
Joyce Hoffman			
(Name of Co	ontact Person)		<u>-</u>
A Helping Hand Resale Store, Inc.			
(Firm/C	Company)		
260 Sabal Ave			
(Add	lress)		
Merritt Island, FL 32953			•
(City/State a	nd Zip Code)		*
For further information concerning this matter,	please call:		
Joyce Hoffman	at (480-0	510
(Name of Contact Person)	(Area Code	(I	Daytime Telephone Number)
Enclosed is a check for the following amount:			
■ \$35 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filit Certified Co (Additional enclosed)	ору	Certificate of Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	:	Amend Divisio Clifton	ET ADDRESS: ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to Articles of I	section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Dissolution:		
FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	A Helping Hand Resale Store, Inc.		
SECOND:	The document number of the corporation (if known):		
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)		
	SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE)		
	(CHECK/COMPLETE ONE) ■ The date of meeting of members at which the resolution to dissolve was adopted.		
	May 10, 2015. 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)		
FOURTH	Effective date of dissolution, if applicable: June 30, 2016		
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
	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)		
	Joyce Hoffman		
	(Typed or printed name of person signing) VP		
	(Title of person signing)		

Filing Fee: \$35