## N9900006089

(Re	questor's Name)	
(Ád	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP		MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
L		

Office Use Only



200075827352

Va/dis Newis

06/08/06--01028--024 \*\*43.75

SECRETARY OF STATE
SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Business	
DOCUMENT NUMBER: <u>N9900006089</u>	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jack E. Marcus (Name of Contact Person)	
_	
A Better Way Credit Counseling Inc  (Firm/Company)  2922 Jog Rd.  (Address)	
Greenacres FL 33467 (City/State and Zip Code)	
For further information concerning this matter, please call:	
Tack E. Marcus at (561) 267-0158  (Name of Contact Person) (Area Code & DaytimeTelephone Number)	
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\times \$\\$43.75 Filing Fee & \times \$\\$43.75 Filing Fee & \times \$\\$52.50 Filing Fee,  Certificate of Status (Additional copy is enclosed)  Certificate of Status (Additional copy is enclosed)	&
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

SECRETARY OF SIL

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the foffewing Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: A Better Way Credit Counseling Inc.
The document number of the corporation (if known): N99000006089 SECOND: THIRD: Adoption of Dissolution (Complete Section I or II) **SECTION I** If the corporation has members entitled to vote: The date of the meeting of members at which the resolution to dissolve was adopted 6-5-06 (CHECK ONE) The number of votes cast for dissolution was sufficient for approval. The resolution was adopted by written consent and executed in accordance with 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)

g:	Jack E. Mareus
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.)
	Jack E. Marcus
	(Typed or printed name of the person signing)
_	President & C.E.O.
	(Title of person signing)

FOURTH:

Effective date of dissolution if applicable: 6-5-06

(no more than 90 days after dissolution file date)

FILING FEE: \$35