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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: DISSOLUTION - PROTECTIVE MEDI PRODUC
Preoduce
DOCUMENT NUMBER: <u>P0 1060 117 209</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
THOMAS D Mc CARTHY (Name of Contact Person)
PROTECTIVE MEDICAL PRODUCTS, INC. (Firm/Company)
8946 OUD PASCO ED (Address)
(Address)
WES LEY CHAPTS, FL 33544 (City/State and Zip Code)
For further information concerning this matter, please call:
7. McCARThy at (8/3) 690 - 2356 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) 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 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	PROTECTIVE MEDICAL PRODUCTS, INC.	
SECOND:	The document number of the corporation (if known): PO 1060117 209	
THIRD:	The file date of the articles of incorporation: $12 - 10 = 200$	
FOURTH:	(CHECK AT LEAST ONE BOX)	
	None of the corporation's shares have been issued.	
	The corporation has not commenced business.	
FIFTH:	No debt of the corporation remains unpaid.	
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	
SEVENTH:	Adoption of Dissolution (CHECK ONE)	
	A majority of the incorporators authorized the dissolution.	
A majority of the directors authorized the dissolution.		
Sign:	ature: Was Inf	
J	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	
	THOMAS D McCARTHY (Typed or printed name of person signing)	
	MANAGING DIRECTOR (Title of Person Signing)	

Filing Fee: \$35