

PO3000025970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

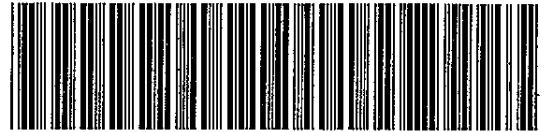
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Ant Diss w/notice
CIS
@ 5/28/04



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05/25/04--01065--004 **43.75

FILED
04 MAY 25 PM 4:30
TALLAHASSEE, FLORIDA
CLERK OF STATE



**ACTIVE
FILINGS**
INCORPORATION SERVICES

10651 N.E. 11th Court
Miami Shores
FL 33138, USA
Phone: 305.893.9870
Fax: 305.402.2248
Toll Free: 877.893.9495

always a step ahead

TRANSMITTAL LETTER

AMENDMENT SECTION
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

FILED
04 MAY 25 PM 4:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: BULLETPR00F, INC

Dear Sir or Madam:

The enclosed **Articles of Dissolution**, and **check** are submitted for filing.

Please return all correspondence concerning this matter to the following:

Roberto Neuberger
Active Filings LLC
10651 NE 11 Court
Miami Shores, FL 33138

For further information concerning this matter, please call:

ROBERTO NEUBERGER at 305-893-9870

Enclosed is a check for the following amount:

\$ 35.00 Filing Fees Articles of Dissolution
\$ 8.75 Certificate of Status

Total \$ 43.75

Sincerely,


Roberto Neuberger
Managing Member
Active Filings LLC

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Department of State:

BULLETPROOF, INC

SECOND: The document number of the corporation (if known): P03000025970

THIRD: The date dissolution was authorized: 04/27/2004

Effective date of dissolution if applicable: 04/27/2004
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

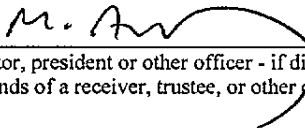
- Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- Dissolution was approved by of the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 10 day of MAY, 2004

Signature: 

(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)

Mike Arnold

(Typed or printed name of person signing)

President

(Title of person signing)

FILED
04 MAY 25 PM 4: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: BULLETPROOF, INC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Name, address and phone number of the claimer; Claim information (order number, product or service provided);

Reason of the claim; Amount claimed.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

~~Mike Arnold~~

BPI

~~11111111111111111111~~

PO BOX 1887

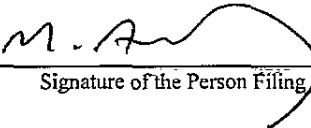
~~Boca Raton, FL 33402~~

BOCA RATON, FL 33429

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Mike Arnold

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00