

PO4 000091730

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APR 22 2022  
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2022 APR 22 PM 2:01

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6/8/2022

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CORPORATION DISSOLUTION

**DOCUMENT NUMBER:** P 04000091730

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

Please return all correspondence concerning this matter to the following:

DESIREE LOTZ

(Name of Contact Person)

HELPING HANDS LIB IMPROVEMENT CENTER,  
(Firm/Company) USA INC

411 CLEVELAND STR, # 138  
(Address)

CLEARWATER FL 33755-4004  
(City/State and Zip Code)

For further information concerning this matter, please call:

DESIREE LOTZ

(Name of Contact Person)

at ( 727-642-8087

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee.<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|---|---|---|---|

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

2022 APR 22 PM 2:01

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 Florida Department of State:

HELPING HANDS LIFE IMPROVEMENT CENTER  
USA INC

SECOND: The document number of the corporation (if known): P 04000091730

THIRD: The date dissolution was authorized: 4-4-2022

Effective date of dissolution if applicable: 4-30-22  
(no more than 90 days after dissolution file date)

**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.

FOURTH: Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.

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)

DESIREE LOTZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35