P05000062273

(Requestor's Name)				
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PICK-UP WAIT	MAIL			
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COVER LETTER

Division of Corporations					
SUBJECT: dissolution of Corporation	- ,				
DOCUMENT NUMBER: P05000042273	us.				
The enclosed Articles of Dissolution and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
(Name of Contact Person)	-				
(Name of Contact Person)					
HELP LATING INCORPORATES (Firm/Company)					
` · · ·					
(Address)	_				
· · · · · · · · · · · · · · · · · · ·					
Ft. WALTON BEACH FL 31548	_				
(City/State and Zip Code)					
For further information concerning this matter, please call:					
(850) 499 7203					
(Name of Contact Person) at (850) 862 0903 (Area Code & Daytime Telephone Nu	mber)				
Enclosed is a check for the following amount:					
S35 Filing Fee \$\textsuperscript{\textsuperscript	Se.				
MAILING ADDRESS: STREET ADDRESS:					
Amendment Section Amendment Section Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	;				

FROM:

FAX NO. :8586548566

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:
	Help Cativo Incorporated 6
SECOND:	The document number of the corporation (if known): Po.5000062273
THIRD:	The file date the articles of incorporation: 4/21/2005
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.
	·
Signa	ature: (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.)
	Deave Ul Webster
	(Typed or printed name of person signing)
	- President
	(Title of Person Signing)

Filing Fee: \$35

FROM:

Notice of Corporate Dissolution

	by the dissolved corporation rase provided in s. 607.1407, F.:	umed below for resolution of pays S.	ment of fruktions civiling
is "Notice of Corpora	te Dissolution" is optional an	d is not required when filing a volu	ntary dissolution.
ume of Corporation;	Alelp Latino	INCOSperated	
ite of dissolution will sciffed in the Articles		lled with the Department of State o	r 95
scription of information	on that must be included in a	claim:	
Co.	rporation ceas	ed business ope	rations,
with No	intent of fut	ure activity.	
	-		
uiling address where c	laims can be sent: (Claims car	anot be sent to the Division of Corr	orations)
	- lan 144 / 1	L1.1.1	
· · · · · · · · ·	COANNE MI	Mehster	
	934 N. BEA	rl Pkwg.	
<u></u>	A. Walten	Beach Ft 325-18	**************************************
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claim against the above thin 4 years after the f	<u>-</u>	parred unless a proceeding to enforce	ce the claim is commence
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,			
Camine W.	Webster	dana 4	Maleket
Printed	Name of the Person Filing	Signature of th	e Person Piling
		•	

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

EBOM: