PD5000114465

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(Address)	
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08/27/07--01051--015 **43.75

SECRETARY OF STATE DIVISION OF CORPORATIONS

05 8/3000 Diss

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: DISSOLVE CORPORA	TION
DOCUMENT NUMBER: P05000114	1465
The enclosed Articles of Dissolution and fee	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
SHERRIE FOGLIA	
(Name of C	ontact Person)
COSTAMAR PRO TAX SERVICI	ES
(Firm/	Company)
7120 STIRLING RD	
(Add	iress)
HOLLYWOOD FL 33024	
(City/State	and Zip Code)
For further information concerning this matter	er, please call:
SHERRIE FOGLIA	at (_954) 4301116
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount	:
\$35 Filing Fee \$\sum \$43.75 Filing Fee & Certificate of Status]\$43.75 Filing Fee &\$52.50 Filing Fee, Certified Copy
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	Tallahassee, FL 32301



ARTICLES OF DISSOLUTION

2007 AUG 27 PM 3: 40

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:		
	BEST DOMESTIC HELPERS, INC.	
SECOND:	The document number of the corporation (if known): P05000114465	
THIRD:	The file date of the articles of incorporation: 08/17/2005	
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.		
Sign	ature: × Lummur Ladenne C	
	(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.)	
	Angolica Himan (Typed or printed name of person signing)	
	(Title of Person Signing)	

Filing Fee: \$35