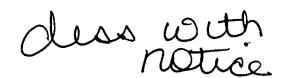
P08000097154

(Re	equestor's Name)	
(Ac	idress)	
· (Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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100/11 1/12:11

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Corpo	oration - All Hands On Tech, Inc.
अर्च । -	•
DOCUMENT NUMBER: P080000	097154
The enclosed Articles of Dissolution an	d fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Mark D. LaFond	
(Name	of Contact Person)
All Hands On Tech, Inc.	
	Firm/Company)
171 N. Atlantic Ave., Unit 19	
	(Address)
Cocoa Beach, FL 32931	` '
	State and Zip Code)
For further information concerning this r	matter, please call:
Mark D. LaFond	at (321) 704-4814
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following am	ount:
\$35 Filing Fee \$\forall \$43.75 Filing Fee & Certificate of Status	
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

"FILED

ARTICLES OF DISSOLUTION

2011 JAN 12 AM 10: 57

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following STATE articles of dissolution:

TALLAHASSEE.FLORIDA

	•
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	All Hands On Tech, Inc.
SECOND:	The document number of the corporation (if known): P08000097154
THIRD:	The file date of the articles of incorporation: 10/29/2008
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:
	(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.)
	Mark D. LaFond
	(Typed or printed name of person signing)
	President
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

his notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims gainst 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.
Jame of Corporation: All Hands On Tech, Inc.
Pate of dissolution will be the date the dissolution is filed with the Department of State or as pecified in the Articles of Dissolution.
escription of information that must be included in a claim:
No business was performed by All Hands On Tech, Inc. since it's date of
ncorporation.
lailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
All Hands On Tech, Inc.
171 N. Atlantic Ave., Unit 19
Cocoa Beach, FL 32931
claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced ithin 4 years after the filing of this notice.
Mark D. LaFond
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