

P100000027062

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000277152 3)))



H100002771523ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : BUSH ROSS, P.A.
Account Number : I19990000150
Phone : (813) 224-9255
Fax Number : (813) 223-9620

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 28 PM 1:51

RECEIVED

10 DEC 28 PM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

② - 12754.0

**DISSOLUTION OR WITHDRAWAL
OMNIRESPONSE SAFETY SOLUTIONS, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$43.75

Any Diss
CC
⑩ 12/29/10

Facsimile Audit No.: H10000277152 3

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:
OMNIRESPONSE SAFETY SOLUTIONS, INC.

SECOND: The document number of the corporation (if known): P10000027062

THIRD: The file date of the articles of incorporation: MARCH 26, 2010

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.

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.)

ROBERT DECECCO

(Typed or printed name of person signing)

PRESIDENT, & SOLE DIRECTOR

(Title of Person Signing)

Filing Fee: \$35

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 DEC 28 PM 1:51