(Requestor's Name) (Address)	800206968398
(City/State/Zip/Phone #)	05/02/1101039009 **43.75
(Business Entity Name) (Document Number)	
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COVER LETTER

Division of Corporations

SUBJECT: Dissolution of Keeping Them Home and Safe Companions Inc.

DOCUMENT NUMBER: P10000083429

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

Please return all correspondence concerning this matter to the following:

Maureen K. Rulison

(Name of Contact Person)

Keeping Them Home and Safe Companions Inc.

(Firm/Company)

4399 35th Street North

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

Maureen Rulison at (727) 409-2292

(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$\sum_{\text{S35 Filing Fee}}\$ \sum_{\text{S43.75 Filing Fee}}\$ \text{\$\text{S43.75 Filing Fee}}\$ & \sum_{\text{S43.75 Filing Fee}}\$ & \sum_{\text{S2.50 Filing Fee}}\$ & \sum_{\text{Certified Copy}}\$ & \text{Certified Copy}\$ & \text{Certified Copy

MAILING ADDRESS:

St. Petersburg, FL 33714

TO: Amendment Section

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

enclosed)

ARTICLES OF DISSOLUTION

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:
	Keeping Them Home and Safe Companions, Inc.
SECOND:	The document number of the corporation (if known): P10000083429
THIRD:	The date dissolution was authorized: 01/07/2011
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)
	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by the shareholders through voting groups.
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:
	The number of votes cast for dissolution was sufficient for approval by
	(voting group)
	Signature: Muselv Receiver or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by
	Maureen K. Rulison
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35