AZARUS CORPORATE INDUSTRIES, INC. Requestor's Name 890 S.W. 87 AVENUE, SUITE: 16 Address MIAMI, FLORIDA 33174 (305)552-5973 City/State/Zip Phone # LOCAL REPRESENTATIVE TALLAHASSEE Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) 000002314100---10/07/97--01066--007 *****35.00 ******35.0 (Corporation Name) (Document #) Walk in Pick up time _ 2100 Certified Copy Certificate of Status Mail out Photocopy Will wait AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/ Director of Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger Ver. OTHERFILINGS **Annual Report** W.P. Verifyer Foreign Fictitious Name

Limited Partnership

Reinstatement Trademark

Other

Examiner's Initials

Name Reservation

ARTICLES OF DISSOLUTION



Pursuant to section 607.1403, Florida Statutes, this corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: R. E. L. 6 MANS6 MENT
	IN.
SECOND:	The date dissolution was authorized: Sept 3 197.
THIRD:	Adoption of Dissolution (check one)
	Dissolution was approved by the sha cholders. The number of votes cast for dissolution was sufficient for approval.
	Dissolution was approved by vote of 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)
Sigr	ned this 6 day of 8 epst 9 .
	Signature (By the Chairman or Vice Chairman of the Board, President, or other officer)
	EIDA ARTIGAS
	(Typed or printed name)
	PRETIDENT
	(Title)