Requestor's Name R.O. Box Address Address (856) City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. Southern Compart Have Office Use Only (Corporation Name) (Corporation Name) (Corporation Name)

1. South	(Corporation Name)	Ditailize Tar	<u>.</u>
2	(Corporation Name)	(Document #)	99 R C
3	(Corporation Name)	(Document #)	SSC 5
4	(Corporation Name)	(Document #)	VED PH 4:20 PGRATIONS FLOR DA
Walk in	Pick up time	Certifie	
Mail out	☐ Will wait ☐ AMENDME		ate of Status SEC
Profit	Amendment		FILI DEC 15 AHASSE
NonProfit	Resignation of F	R.A., Officer/Director	
Limited Liability	Change of Regis	stered Agent	95 t
Domestication	Dissolution/With	hdrawal	21 IDA
Other	Merger		

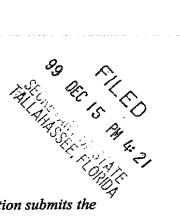
OTHER FILINGS
Annual Report
Fictitious Name
 Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

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Examiner's Initials	TP) <u>_</u>	3/2
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Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: Southern Contact Home
Tet	aling Inc
SECOND:	The date dissolution was authorized: 12 19 95
THIRD:	Adoption of Dissolution (CHECK ONE)
	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
Diss	olution was approved by vote of the shareholders through voting groups.
	The following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
Signe	ed this 14th day of lecentro, 1999.
Signature _	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	(By the Chairman of Vice Chairman of the Board, Freshden, of other officer)
	(Typed or printed name)
	Yrside (Title)