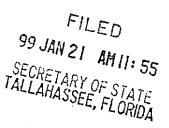
0067068 Requester's Name SPEECHLESS ADUT AGGY 1417 SW 2rd STROET PT LAUD FL 33312 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document # (Corporation Name) ☐ Walk in Pick up time Certified Copy ☐ Mail out ☐ Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit ☐ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability ☐ Change of Registered Agent Domestication ☐ Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION ☐ Annual Report ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other JAN 2 7 1999

Examiner's Initials

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 is: Speechless Advactising Abouty	/NC
SECOND:	The date dissolution was authorized: $09/30/98$	
THIRD:	Adoption of Dissolution (CHECK ONE)	
Disso was	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	. <u></u>
Disso	olution was approved by vote of the shareholders through voting groups.	_
T	he following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:	
The 1	number of votes cast for dissolution was sufficient for approval by	
	(voting group)	
Signed	I this day of	
Signature 🔀	(By the Chairman or Vice Chairman of the Board, President, or other officer)	
	DAUD W SACOFF (Typed or printed name)	
	PRES (Title)	