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LARRY Si 6415 Wingfo Tampa, Florid	of Circle	
TORROS, FIORC	10 33034	
City/State/Zip	Phone #	

600002595516--6 -07/22/98--01067--005 *****35,00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

w filings	AMEND	MENTS	iliyash ku u
☐ Mail out	☐ Will wait	Photocopy	Certificate of Status
☐ Walk in	Pick up time		Certified Copy
4	(Corporation Name)	(Doc	ument#)
	(Corporation Name)	(Doc	ument #)
3.			
2	(Corporation Name)	(Doc	ument #)
1	(Corporation Name)	(Doc	ument #)
•			

	AMENDMENTS
Profit	Amendment
NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	Merger

98 JUL 22 M 10: 4
SECRETARY OF STATE
TALLAHASSEE, FLORID

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
 Trademark
Other

JUL 2 4 1998

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: Smith Family Total Home	
Services, INC.		
•	The date dissolution was authorized: 1-23-98	
THIRD:	Adoption of Dissolution (CHECK ONE)	
Disso was	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	
Disso	olution was approved by vote of the shareholders through voting groups.	
	he following statement must be separately provided for each voting group attitled to vote separately on the plan to dissolve:	
The	number of votes cast for dissolution was sufficient for approval by	
w.	(voting group)	
Signe	d this 204 day of July , 19 98.	
Signature Aurence O Smits (By the Chairman or Vice Chairman of the Board, President, or other officer)		
	LAWREDCE O- SM. He TR (Typed or printed name)	
	Owner nesident (Title)	