P980000/3621

(Daguarta da Nama)	
(Requestor's Name)	•
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Eddinose Linkly Harrie)	
(Document Number)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	/
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: Discolution of Confension					
DISTOLUTION OF CONPUNENT ON DOCUMENT NUMBER: P98000013621					
The enclosed Articles of Dissolution and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
CHERRY L D. Topolito (Name of Contact Person)					
(Name of Contact Person)					
MANTRACK PROTERTIUF SERVICES, INC. (Firm/Company)					
123 p.w. 13TH. St Suite 304-11 (Address)					
BOCA PLAND M 33432 (City/State and Zip Code)					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
(Name of Contact Person) at (56) 750-6005 (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$\bigcup \\$35 \text{ Filing Fee & \$\bigcup \\$43.75 \text{ Filing Fee & \$\bigcup \\$52.50 \text{ Filing Fee, } \\ Certificate of Status & Certified Copy & Certificate of Status & Certified Copy & (Additional copy is enclosed) & enclosed)					
MAILING ADDRESS: STREET ADDRESS:					
Amendment Section Amendment Section Division of Corporations Division of Corporations					
P.O. Box 6327 Clifton Building					
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					

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:			
	MANTRACK PROTERTIVE SORVICED, INC.			
SECOND:	The document number of the corporation (if known): P98000013621			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)			
FOURTH:	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			
	CHeny (D. Ipolito, Mes. SSFOF & T.			
	(voting group)			
	Signature: (By a director, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)			
	CHERYL D. Ippolito (Typed or printed name of person signing)			
	Previoant			
	(Title of person signing)			

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:	MTMCK PROTORTIUF SORVICES, TIK.	
Date of dissolution will be the specified in the Articles of Diss	e date the dissolution is filed with the Department of State or as ssolution.	
Description of information that	it must be included in a claim:	
<u></u>	Lee Andal Colles	
Mailing address where claims	can be sent: (Claims cannot be sent to the Division of Corporations)	
	BOTA RATION, PC 33432	·
		
*		
A claim against the above nam within 4 years after the filing o	ned corporation will be barred unless a proceeding to enforce the claim is of this notice.	commenced
CHONYL D	. Topolito Dehenge D. 5	Appointo

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

Cheryl D. Ippolito

123 N.W.13th Street / Suite: 304-11 **Boca Raton, Florida 33432**

Telephone: 561-750-6005

January 1, 2009

Florida Department Of State Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs / Ms.

Please be advised that I would like to File for Dissolution of my Corporation identified as: MANTRACK PROTECTIVE SERVICES, INC., effective upon receipt of this request. The Document Number for this Corporation is: P98000013621 and the original Filing Date was 03/13/98.

PLEASE NOTE: 1 am presently requesting to Amend the Articles of Incorporation on my other Corporation identified as: MANTRACK, INC. . The Document Number for this Corporation is: P95000061794.

REQUEST: THE NEW NAME FOR THIS CORPORATION WILL BE:

MANTRACK PROTECTION AND INVESTIGATIVE SERVICES, INC.

Please feel free to contact me should you have any additional questions.

Contact Information: CHERYL D. IPPOLITO

TEL.# 561-750-6005 FAX: 1-800-282-7266

ADDRESS: 123 N.W. 13th Street

Suite: 304-11

Boca Raton, Florida 33432

I would like to thank you in advance for your kind and prompt attention to this matter.

Sincerely,

Cheryl D. Appolito