

212005 (FAX)

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6380

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From: Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

DISSOLUTION OR WITHDRAWAL  
JIMAR, INC.

Certificate of Status	0
Certified Copy	1
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*Wolds u/notice  
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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DEC 31 2012

T. LEWIS

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**ARTICLES OF DISSOLUTION  
FOR  
JIMAR, INC.**

Jimar, Inc., a Florida corporation, submits the following Articles of Dissolution pursuant to Section 607.1403 of the Florida Business Corporation Act (the "Act");

**ARTICLE I**

The name of the corporation is Jimar, Inc. (the "Corporation"), which was assigned document number 212005.

**ARTICLE II**

Dissolution of the Corporation was authorized on December 31, 2012, pursuant to a joint unanimous written consent of the Board of Directors of the Corporation given in accordance with the provisions of Section 607.0821 of the Act, and a joint unanimous written consent of the shareholders of the Corporation given in accordance with the provisions of Section 607.0704 of the Act.

**ARTICLE III**

Dissolution of the Corporation was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

Effective as of December 31, 2012

JIMAR, INC.,  
a Florida corporation

By: Margaret H. O'Malley  
Name: Margaret H. O'Malley  
Title: Vice President

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FILED  
2012 DEC 31 PM 4:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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: JIMAR, INC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of Information that must be included in a claim:

If you feel you have a possible claim, please contact the person listed below  
with a detailed description of the nature and amount of the asserted claim.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Margaret H. O'Malley

5010 Bayshore Blvd, #4

Tampa, FL 33611

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Margaret H. O'Malley, Vice President

Printed Name of the Person Filing

Margaret H. O'Malley  
Signature of the Person Filing

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

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