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(Requestor's Name)					
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(City/State/Zip/Phone #)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Business Entry Name)					
(Document Number)					
Certified Copies Certificates of Status					
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Special Instructions to Filing Officer:					
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Office Use Only



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JUL 02 2020 S. YOUNG

COVER LETTER

Division of Corporations Florida Microfilm Corporation SUBJECT: DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joe M. Chambers (Name of Contact Person) Johnston Hinesley PC (Firm/Company) PO Box 2246 (Address) Dothan, AL 36302 (City/State and Zip Code) For further information concerning this matter, please call: Joe M. Chambers (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & ■ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed)

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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:				
	Florida Microfilm Corporation				
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized:				
	Effective date of dissolution if applicable:				
	(no more than 90 days after on Note: If the date inserted in this block does not meet the applicable statutory filing not be listed as the document's effective date on the Department of State's records.	requiremen		date will	
FOURTH:	Dissolution was approved by the shareholders, in the manner required the articles of incorporation. Signature:	cted, by	thap. 2020 JUL 12 AM 7: 13	and	
	an incorporator - if in the hands of a receiver, trustee, or other court appointed fidu- that fiduciary)				
	Gail Murphy				
	(Typed or printed name of person signing)				
	President				
	(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: Florida Microfilm Corporation The above named corporation is the subject of dissolution and the effective date of a dissolution is: (date filed with the Dept. if date specified in the Articles of Dissolution) Description of information that must be included in a claim: Any claim must be in writing, and must specify (i) the name, mailing address and telephone number of the claimant, (ii) the amount of the claim, (iii) the date the claim was incurred, and (iv) a description of the nature of the claim with any supporting documents enclosed. Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) P.O. Box 2246 Dothan, AL 36302 Attention: Joe M. Chambers 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. Gail Murphy Printed Name of the Person Filing

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