350050

| (Re | equestor's Name |) |
|-------------------------|-------------------|--------------|
| (Ac | ldress) | |
| (Ac | idress) | |
| (Cit | ty/State/Zip/Phor | ne #) |
| · PICK-NB | WAIT | MAIL |
| `. (Bu | isiness Entity Na | nme) |
| (Do | ocument Number | ·) |
| Certified Copies | _ · Certificate | es of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE TALLAHASSEE, FLORIDI OP OCT 22 AH 8: 42

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COVER LETTER

| TO: Amendment Section Division of Corporations |
|--|
| SUBJECT: Koss, Olinger and Company |
| DOCUMENT NUMBER: 356050 |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Andrea S. Stegall (Name of Contact Person) |
| Carolina First Bank (Firm/Company) |
| NO4 South Main St. (Address) |
| Genville, 3C 29601 (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| Andrea Stegall at (SIA) 421-1048 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| Striling Fee \$\bigcup \\$43.75 \text{ Filing Fee & }\bigcup \\$43.75 \text{ Filing Fee & }\bigcup \\$52.50 \text{ Filing Fee, }\bigcup \bigcup \b |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle |

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2009

ANDREA S. STEGALL CAROLINA FIRST BANK 104 SOUTH MAIN ST. GREENVILLE, SC 29601

SUBJECT: KOSS, OLINGER AND COMPANY

Ref. Number: 356050

We have received your document for KOSS, OLINGER AND COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

Photo copies are not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Letter Number: 209A00032755

Irene Albritton Regulatory Specialist II

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: | | | |
|---------|---|---|--|--|
| | Koss, Olinger and Company | | | |
| SECOND: | The document number of the corporation (if known): 356050 | | | |
| THIRD: | The date dissolution was authorized: October 1, 2009 | | | |
| | Effective date of dissolution if applicable: October 1, 2009 (no more than 90 days after dissolution file) | e date) | | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | | |
| | Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval. | r dissolution | | |
| | Dissolution was approved by the shareholders through voting groups. | | | |
| | The following statement must be separately provided for each voting group entito vote separately on the plan to dissolve: | itled | | |
| | The number of votes cast for dissolution was sufficient for approval by | | | |
| | (voting group) | -1.a | | |
| | | SECRETARY OF STAIDA | | |
| | Signature: DOSE | SEE | | |
| | (By a director, president or 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) | FLORIDA 8: 42 | | |
| | William D. Olinger III | | | |
| | (Typed or printed name of person signing) | | | |
| | President | | | |
| | (Title of person signing) | | | |

Filing Fee: \$35