

MAY. 2. 200 2:37PM

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NO. 768 P. 1

J29641

Florida Department of State

Division of Corporations

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To: Division of Corporations
Fax Number : (850)205-0380

From: Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)558-1575

07 MAY -2 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CSC TXT #2940

DISSOLUTION OR WITHDRAWAL

LIBMAN FAMILY CORP.

RECEIVED
07 MAY -2 AM 8:00
DIVISION OF CORPORATIONS

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Diss/Notice

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Corporate Filing Menu

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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:

Libman Family Corp.

SECOND: The document number of the corporation (if known): J29641

THIRD: The date dissolution was authorized: April 4, 2007

Effective date of dissolution if applicable: Date of filing
(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

(voting group)

Signature: 

(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)

Allen C. Lox
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35

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07 MAY -2 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Libman Family Corp.

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:

Name of claimant
Detailed description of claim (including amount, date or
period to which claim relates, and all other pertinent
information related to claim)

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

c/o Allen C. Lox
64 Thornley Drive
Chatham Township, NJ 07928

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.

Allen C. Lox, President
Printed Name of the Person Filing


Signature of the Person Filing

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