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(0	(City/State/Zip/Phone #)					
PICK-UP	WAIT MAIL					
(E	Business Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
Special Instructions t	o Filing Officer:					
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Office Use Only



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J. SAULSBERRY EXAMINER

JUN 27 2012

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ACCOUNT NO. : I2000000195

REFERENCE: 237106 7453550

AUTHORIZATION

COST LIMIT

ORDER DATE : June 12, 2012

ORDER TIME: 9:48 AM

ORDER NO. : 237106-075

CUSTOMER NO: 7453550

DOMESTIC FILINGS

NAME: IMAGINE-POLK COUNTY, LLC

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes - EXT# 2920

EXAMINER'S INITIALS:

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

5. CHECK ONE:	. The date the dissolution was approved: 611200.	
Entity no longer needed. Entity no longer needed. 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421 6. All remaining property and assets have been distributed among its members in accordance with their respectights and interests. 7. CHECK ONE: There are no suits pending against the company in any court. OR- Adequate provision has been made for the satisfaction of any judgment, order or decree which may entered against it in any pending suit. Signature Signature Printed Name Barry J. Sharp, Treasurer		
5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. \[\textstyle=	. A description of occurrence that resulted in the limited liability company's dissolution pursuant to see 608.441, Florida Statutes, (copy 608.441 on back cover letter).	tion
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	Signature Printed Name	
Imagine Schools Non-Profit, Inc.	Barry J. Sharp, Treasurer	
	Imagine Schools Non-Profit,	nc.