

L12000148024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

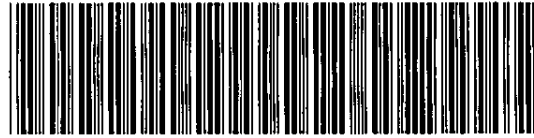
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE DIVISION OF CORPORATION
TALLAHASSEE, FLORIDA

DEC 2 2014



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 395424 4338256

AUTHORIZATION :

COST LIMIT : \$25.00

ORDER DATE : December 1, 2014

ORDER TIME : 10:24 AM

ORDER NO. : 395424-020

CUSTOMER NO: 4338256

DOMESTIC FILINGS

NAME: G4S-ICS-SJC, 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: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G4S-ICS-SJC, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Beckett

(Name of Person)

G4S Government Solutions, Inc.

(Firm/Company)

7121 Fairway Drive, Suite 301

(Address)

Palm Beach Gardens, FL 33418

(City/State and Zip Code)

For further information concerning this matter, please call:

David Beckett

(Name of Person)

561

at ()

472-3610

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

— \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
G4S-ICS-SJC, LLC
2. The Articles of Organization were filed on November 20, 2012 and assigned
document number L12000148024
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
No longer doing business.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: David Beckett
G4S Government Solutions, Inc.
7121 Fairway Drive, Suite 301
Palm Beach Gardens, FL 33418
6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:


Signature

Chad Conyac

Printed Name

FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA