P00000022892

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Ci	ty/State/Zip/Phone	e #)
_	*	·
☐ PICK-UP	MAIT	MAIL MAIL
(Bu	ısin ess Entlty Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
6	Titue off-lie	
Special Instructions to	Filing Officer:	
		with the same of t
		ĺ
<u> </u>		

Office Use Only



800050357558

04/14/05--01019--008 **43.75

William. Diss. WilNotice

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Driving Impressions, Inc. Dissolution				
DOCUMENT NUMBER: P00000022892				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jon Gray				
(Name of Person)				
(Name of Firm/Co	mpany)			
PO Box 453				
(Address)				
Ellenton, FL 34222				
(City/State/and Zi	p Code)			
For further information concerning this matter, please call:				
Jon Gray at (941 776-3458 (Area Code & Daytime Telephone Number)			
(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
(Addit	5 Filing Fee & [\$52,50 Filing Fee, ied Copy Certificate of Status & Certified Copy sed) (Additional copy is enclosed)			
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399			

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:				
	Driving Impressions, Inc.				
SECOND:	The document number of the corporation (if known): P00000022892				
THIRD:	The date dissolution was authorized: April 3, 2005	G FT)			
	Effective date of dissolution if applicable: April 30, 2	005 n 90 days after dissolution file	date)		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The n was sufficient for approval.	umber of votes cast for	dissolution		
	Dissolution was approved by of the shareholders thro	ugh voting groups.			
	The following statement must be separately provided for to vote separately on the plan to dissolve:	each voting group enti	tled		
	The number of votes cast for dissolution was sufficient for	r approval by			
			۵		
	(voting group)		9		
	Signed this 372 day of April	2005	APR 11		
	Signature (By a director, president or other officer - if directors or officers h an incorporator - if in the hands of a receiver, trustee, or other couthat fiduciary)		ARY OF STATE CORPORATIONS		
	Frank Honackie				
	(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

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Driving Impressions, Inc.

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:

Date incurred, reason, and amount of claim

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

2437 53rd St.

Sarasota, FL 34234

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.

Frank Honackie

Printed Name of the Person Filing

against this corporation as provided in s. 607.1407, F.S.

Signature of the Person Filing

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