P00000080994

| (Requestor's Name) |
|---|
| (industrial of industrial) |
| (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

C.COULLIETTE

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EXAMINER

COVER LETTER

TO: Amendment Section

| Division of Corporations | • | |
|--|---|--|
| SUBJECT: DISSOLUTION OF CORP | PORATION | |
| DOCUMENT NUMBER: P00000080994 | | |
| The enclosed Articles of Dissolution and fee are submitted for filing | ng. | |
| Please return all correspondence concerning this matter to the following | wing: | |
| LAVERNE J. WHITE | | |
| (Name of Contact Person) | · · | |
| LAVERNE WHITE CONSULT (Firm/Company) | ING, INC. | |
| 339 HAMMOCKS DR | | |
| 239 HAMMOCKS DR. (Address) | , | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| LNERWE WHITE at (407) (Area Code & | 291-0604 & Daytime Telephone Number) | |
| Enclosed is a check for the following amount: | | |
| \$35 Filing Fee \$\sum_\$43.75 Filing Fee & \$\sum_\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) | |
| Amendment Section Ame Division of Corporations Divi P.O. Box 6327 Clif | EET ADDRESS: endment Section ision of Corporations ton Building 1 Executive Center Circle | |

Tallahassee, FL 32301

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: | | |
|---|--|--|--|
| | LAVERNE WHITE CONSULTING, INC. | | |
| SECOND: | The document number of the corporation (if known): P0000080994 | | |
| THIRD: | The date dissolution was authorized: 9-30-09 | | |
| | Effective date of dissolution if applicable: 9-30-09 (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) | | | |
| | V OF STATE ORID | | |
| | 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) | | |
| | LAVERNE J. WHITE (Typed or printed name of person signing) | | |
| | (13ped or printed mante or person signing) | | |
| PRESIDE NT | | | |
| (Title of person signing) | | | |

Filing Fee: \$35