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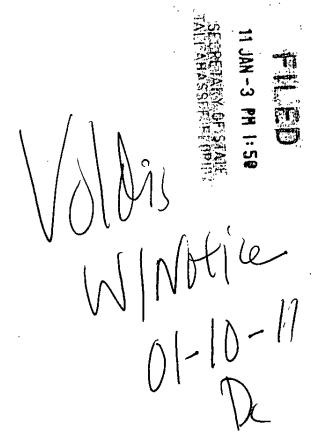
Box 997 Edward co 81612
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Decomposit Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special methodicite to 1 lining Gillion.
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COVER LETTER

TO: Amendment Section		
Division of Corporations		
SUBJECT: The Imprimation Group INC.		
DOCUMENT NUMBER: P0/0000 660 2		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
William R PRATIMEN		
(Name of Contact Person)		
(Firm/Company)		
• • • •		
(Address)		
P.O. Box 997 (Address) Edwarps Co 8/632		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (303) 883-4954 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\times \\$43.75 Filing Fee & \$\times \\$43.75 Filing Fee & \$\times \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section		

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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:
	The Imprimation Group Incorporated
SECOND:	The Imprimeron Group Inorporated The document number of the corporation (if known): P0/00006602
THIRD:	The date dissolution was authorized: $\frac{12/30/10}{12/30/10}$
	Effective date of dissolution if applicable: 12/3//10 (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
	William R PRATIGE 100% owner of Shanes
	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)
	(Typed or printed name of person signing)
	Presi Dent

Filing Fee: \$35

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: The Imprimative Group Fucat Porated
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:
Reason For Chaim
- Brount
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
• • •
P.D. Box 997 Edwards CO 81632
Edwards CO 81632
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.
William & Parties a Challen
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