

PO 200 00000 77

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

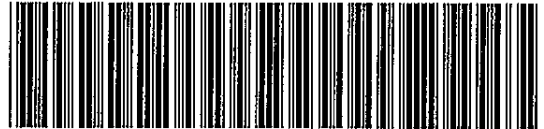
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/05/04--01013--003 **35.00

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04 APR 20 PM 3:37
SECRETARY OF STATE
TALLAHASSEE, FL

4/21

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Voluntary Dissolution of Corporation

DOCUMENT NUMBER: P02000000077

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Stephanie L. Huffman

(Name of Person)

IOA Group, Inc.

(Name of Firm/Company)

P.O. Box 162207

(Address)

Altamonte Springs, FL 32716-2207

(City/State/and Zip Code)

For further information concerning this matter, please call:

Stephanie Huffman

(Name of Person)

at (407) 788-3000

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

Received

APR 15 2004

Altamonte Springs, FL

April 13, 2004

IOA GROUP, INC.
% STEPHANIE L. HUFFMAN
PO BOX 162207
ALTAMONTE SPRINGS, FL 32716-2207

SUBJECT: IOA GROUP, INC.
Ref. Number: P02000000077

We have received your document for IOA GROUP, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut
Document Specialist

Letter Number: 604A00024136

RECEIVED

04 APR 20 AM 11:07

DIVISION OF CORPORATIONS

NOTICE: The enclosed document has not been filed and is being returned to you for the following reason(s):

YOU HAVE SUBMITTED TWO DOCUMENTS TO DISSOLVE THE SUBJECT CORPORATION. PLEASE CHOOSE THE CORRECT TYPE OF DISSOLUTION ACCORDING TO FLORIDA STATUTES AND RESUBMIT ONLY ONE DOCUMENT.

PLEASE RETURN YOUR DOCUMENT, ALONG WITH A COPY OF THIS LETTER, WITHIN 60 DAYS OR YOUR FILING WILL BE CONSIDERED ABANDONED.

IF YOU HAVE ANY QUESTIONS CONCERNING THE FILING OF YOUR DOCUMENT, PLEASE CALL (850) 245-6908.

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with Department of State:

IOA Group, Inc.

SECOND: The document number of the corporation (if known): P02000000077

THIRD: The file date of the articles of incorporation was: 12/31/32003

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

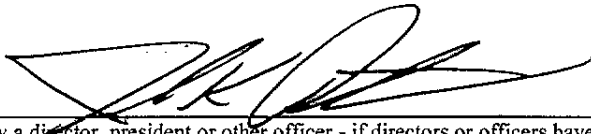
SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

Signed this 26th day of March, 2004.

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.)

John K. Ritenour

(Typed or printed name of person signing)

CEO

(Title of person signing)

Filing Fee: \$35

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA