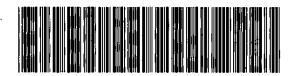
P03000114693

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



200155867282

06/04/09--01048--004 **13.75

05/13/09--01019--018 **30.00



Voldas Thereis 4-8-09

COVER LETTER

| TO: Affiendment Section Division of Corporations | • |
|---|---|
| · | |
| SUBJECT: JGS Leasing Inc. | |
| | |
| DOCUMENT NUMBER: <u>P03000114693</u> | |
| The enclosed Articles of Dissolution and fee are s | submitted for filing. |
| Please return all correspondence concerning this n | natter to the following: |
| | |
| JOSEPH SINKOVIC | |
| (Name of Contac | t Person) |
| (Firm/Com | pany) |
| PO BOX 4122 | · · · · · · · · · · · · · · · · · · · |
| (Address) | |
| BRANDON, FL 33509 | |
| (City/State and | Zip Code) |
| For further information concerning this matter, ple | ease call: |
| | |
| JOSEPH SINKOVIC a | t (813) 662-5460 |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | |
| Certificate of Status Certificate Of Status (Add | 2.75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee, cified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section | STREET ADDRESS: Amendment Section |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building |

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314



May 21, 2009

JOE SINKOVIC P. O. BOX 4122 BRANDON, FL 33509

SUBJECT: JGS LEASING INC. Ref. Number: P03000114693

We have received your document for JGS LEASING INC. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$5.00 is due.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 509A00017265

17 VIEDER 2003 HA S- HUL 8002 STATE TO YRATE STATE AUROLI - 33828 AHALLAH

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: | | | |
|---------|---|--|--|--|
| • | JGS Leasing Inc. | | | |
| SECOND: | The document number of the corporation (if known): P03000114693 | | | |
| THIRD: | The date dissolution was authorized: APRIL 30, 2008 | | | |
| | Effective date of dissolution if applicable: APRIL 30, 2008 (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) | | | |
| | | | | |
| | Signature: Leph 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) | | | |
| | Joseph Sinkovic | | | |
| | (Typed or printed name of person signing) | | | |
| | President | | | |
| | (Title of person signing) | | | |

Filing Fee: \$35