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LATHAM SHUKER BARKER EDEN

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Division of Corporations

Page 1 of 1

P04000076248

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To: Division of Corporations
Fax Number : (850) 205-0380

From: Account Name : LATHAM, SHUKER, BARKER, EDEN & BEAUDINE, LLP
Account Number : 120000000025
Phone : (407) 481-5800
Fax Number : (407) 481-5801

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

DISSOLUTION OR WITHDRAWAL
GALIPETTE, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GALIPETTE, INC.

DOCUMENT NUMBER: P040000076248

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

Please return all correspondence concerning this matter to the following:

IRINA G. DOLINSKIY, ESQ.

(Name of Contact Person)

LATHAM SHUKER BARKER EDEN & BEAUDINE, LLP

(Firm/Company)

390 N. ORANGE AVENUE, SUITE 600

(Address)

ORLANDO, FL 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

IRINA G. DOLINSKIY, ESQ.

(Name of Contact Person)

at (407) 481-5872

(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, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
OF
GALIPETTE, INC.
Document Number P04000076248**

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: Galipette, Inc.

SECOND: The document number of the corporation: P04000076248

THIRD: The date dissolution was authorized: April 30, 2007

FOURTH: Adoption of Dissolution:

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

Signature: _____

David Murphy

(Typed or printed name of person signing)

Vice President

(Title of person signing)

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 Section 607.1407, Florida Statutes.

Name of Corporation: Galipette, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State.

Description of information that must be included in a claim:

Identity of claimant; nature, amount and specific details of claim; services provided against which claim is made.

Mailing address where claims can be sent:

c/o LSBEB Agent Services, Inc.
390 North Orange Ave.
Suite 600
Orlando, Florida 32801

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.

David Murphy

Printed Name of the Person Filing



Signature of the Person Filing