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SECRETARY OF STATE
ALASSEE, FLORIDA



COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: KIMLY INC				
DOCUMENT NUMBER: P05000094332				
The enclosed Articles of Dissolution and fee are submitte	ed for filing.			
Please return all correspondence concerning this matter to	the following:			
DOMINIQIUE V. KIMLY				
(Name of Contact Person)				
(Firm/Company)	• • • • • • • • • • • • • • • • • • • •			
6721 MUNARCH PARK DR	**************************************			
(Address)	71			
APOLLO BEACH, FL 33572				
(City/State and Zip Code)				
For further information concerning this matter, please call	:			
DOMINIQIUE V. KIMLY at (813				
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:				
✓\$35 Filing Fee ☐\$43.75 Filing Fee & ☐\$43.75 Filing Certified Co (Additional cenclosed)				
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

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:			
	KIMLY INCORPORATED			
SECOND:	The document number of the corporation (if known): P05000094332			
THIRD:	The date dissolution was authorized: 09/01/2006			
	Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution	n 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 of the shareholders through voting groups.			
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)	7 0		
	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)	SECRETARY OF STATE ALLAHASSEE, FLORIDA		
	DOMINIQIUE V. KIMLY			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35