P07000030101

(F	Requestor's Name)	
(/	Address)	-
(1	Address)	
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(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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(F	Business Entity Name)	
(c	ousiness Entity Name)	
(0	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions t	o Filing Officer:	

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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: EBRS Rime, Inc.		
DOCUMENT NUMBER: P07000030101		
The enclosed Articles of Dissolution and fee are su	abmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Cynthia McCraw		
(Name of Contact Person)		
Sirote & Permutt, P.C.		
(Firm/Company)		
P.O. Box 55727		
(Address)		
Birmingham, AL 35255-5727		
(City/State and Z	ip Code)	
For further information concerning this matter, plea	ase call:	
Cynthia McCraw at	(_205) 930-5351	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Certi (Addi	75 Filing Fee & \$\begin{array}{ll} \$52.50 Filing Fee, \\ fied Copy & Certificate of Status & \\ Certified Copy & \\ (Additional copy is \\ enclosed) & \end{array}	
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:			
	EBRS Rime, Inc.			
SECOND:	The document number of the corporation (if known): P07000030101			
THIRD:	The date dissolution was authorized: January 27, 2010			
	Effective date of dissolution if applicable: (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)
		(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)		
		Harold W. Ripps		
	(Typed or printed name of person signing)			
	President			
	(Title of person signing)			

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: EBRS Rime, Inc.

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:

Such claim should set forth the name of the claimant, the address and telephone number of the claimant, the nature of the claim, including, but not limited to, all facts supporting the claim and the date such claim arose.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

EBRS Rime, Inc.

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.

Harold W. Ripps

Printed Name of the Person Filing

c/o Harold W. Ripps

Birmingham, AL 35242

100 Village Street

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00