

P 07000 108116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

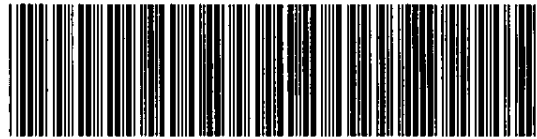
(Document Number)

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FILED

10 JAN - 8 PM 4:09

SECRETARY OF STATE
TALLAHASSEE, FL 32399

Voldis.

D. CORNELL JAN 08 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 10, 2009

MONICA L. WORKENS
1628 SE SHELburnIE WAY
PORT ST. LUCIE, FL 34952

SUBJECT: DARWIN INNOVATIONS CORPORATION
Ref. Number: P07000108116

We have received your document 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.

If the dissolution was approved by the shareholders and if voting by voting groups was required, a statement that the number cast for dissolution was sufficient for approval must be separately provided for each voting group entitled to vote separately on the dissolution. The name(s) of each voting group(s) should be indicated.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 409A00037738

January 4, 2010

Florida Division of Corporations
Amendment Section
PO Box 6327
Tallahassee, FL 32314
Attn: Darlene Connell

RE: Darwin Innovations Corporation

Ms. Connell,

Please find previously filed Articles of Dissolution for Darwin Innovations Corporation that are being resubmitted for purpose of a return address and use of a single form. The fee paid was \$35.00 which cleared the bank on 12/10/2009.

The Cover Sheet is enclosed and all documentation can be forwarded to the address listed below and noted on the cover sheet.

Monica Workens
PO Box 800701
Dallas, Texas 75244

Should you have any questions on the enclosed please feel free to contact me at 772-224-5193.

Best regards,


Monica L Workens

REC-11
2010 JAN -8 AM 8:00
TALLAHASSEE
FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Darwin Innovations Corporation

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Monica L Workens

(Name of Contact Person)

(Firm/Company)

PO Box 800701

(Address)

Dallas, Texas 75244

(City/State and Zip Code)

For further information concerning this matter, please call:

Monica L Workens

(Name of Contact Person)

at (772) 224-5193

(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

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 the Florida Department of State:

Darwin Innovations Corporation

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

THIRD: The file date of the articles of incorporation: September 28, 2007

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.

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.)

Monica L Workens

(Typed or printed name of person signing)

Director/President

(Title of Person Signing)

SECRETARY OF STATE
JAN 8 2008

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Filing Fee: \$35