

P10000020257

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

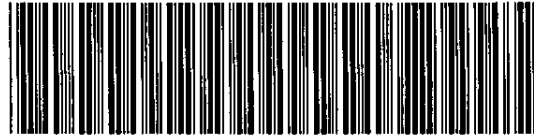
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600241129006

11/13/12--01031--003 \*\*35.00

EFFECTIVE DATE  
11-30-12

RECEIVED  
12 NOV 13 PM 12:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

12 NOV 13 PM 12:07

Voldis.

11-14-12

DC

12 NOV 14 PM 2:31

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 13, 2012

WILLIAMS, GAUTIER, GWYNN & DELOACH, P.A.  
POST OFFICE BOX 4128  
TALLAHASSEE, FL 32315

SUBJECT: ISMPI, INC.  
Ref. Number: P10000020257

RECEIVED  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2012 NOV 14 AM 11:54  
NO LONGER  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

We have received your document for ISMPI, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the date the dissolution was authorized.

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) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 212A00027388

Williams, Gautier, Gwynn & DeLoach, P.A.

Requestor's Name

Post Office Box 4128

Address

Tallahassee, FL 32315 850-386-3300

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ISMPI, Inc. P10000020257  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution for ISMPI, Inc.

**DOCUMENT NUMBER:** P10000020257

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

Please return all correspondence concerning this matter to the following:

Russell D. Gautier

(Name of Contact Person)

Williams, Gautier, Gwynn, DeLoach & Sorenson, P.A.

(Firm/Company)

P.O. Box 4128

(Address)

Tallahassee, Florida 32315-4128

(City/State and Zip Code)

For further information concerning this matter, please call:

Russell D. Gautier

(Name of Contact Person)

at ( 850 ) 386-3300

(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 607.1403, 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:  
ISMPI, Inc.

SECOND: The document number of the corporation (if known): P10000020257

THIRD: The date dissolution was authorized: November 1, 2012

Effective date of dissolution if applicable: November 30, 2012  
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

**EXPIRATION DATE**  
11-30-12

☒ 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: \_\_\_\_\_

(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)

Tim O'Brien

(Typed or printed name of person signing)

President

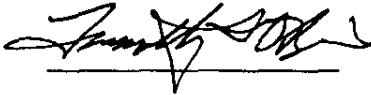

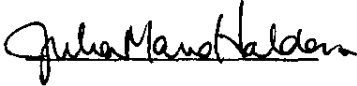
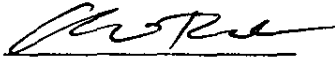
(Title of person signing)

Filing Fee: \$35

12 NOV 14 PM 2:36  
FILED  
CLERK OF CIRCUIT COURT  
JACKSONVILLE, FLORIDA

**SHAREHOLDERS CONSENT TO DISSOLUTION OF ISMPI, INC.**

We, the undersigned, being the shareholders of ISMPI, Inc., a Florida corporation, consent to the voluntary dissolution of the corporation pursuant to §§ 607.1402 and 607.0704, *Florida Statutes*.

Shareholder	Signature	Date of Signing	Percentage of Shares Owned
Tim O'Brien		<u>11/1/2012</u>	40%
Dianne O'Brien		<u>11/1/12</u>	20%
Julia-Marie Halderman		<u>11/1/12</u>	20%
Michele Rose		<u>10-29-12</u>	20%