## P10000031181

| (Requestor                        | s Name)               |
|-----------------------------------|-----------------------|
| (Address)                         |                       |
| (Address)                         |                       |
| (City/State/                      | Zip/Phone #)          |
| PICK-UP                           | WAIT MAIL             |
| (Business E                       | Entity Name)          |
| (Document Number)                 |                       |
| Certified Copies Co               | ertificates of Status |
| Special Instructions to Filing Of | ficer:                |
|                                   |                       |
| •                                 |                       |
|                                   |                       |
|                                   |                       |

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SECRETARY OF STATE TALLAHASSEE, FLORID

A ( 1 ) 155 ( a 5/10/10

## **COVER LETTER**

| Division of Corporations  |   |  |
|---|---|--|
| SUBJECT: Dissolution of THINKPA   | ANDAS, INC.   |  |
| DOCUMENT NUMBER: P10000037  | 181   |  |
| The enclosed Articles of Dissolution and fee  | e are submitted for filing.   |  |
| Please return all correspondence concerning this matter to the following:                       |   |  |
| ROBERT J. GOSSELIN, SR.   | and and Paramalan   |  |
| (Name of Co   | ontact Person)  |  |
| · (Firm/  | Company)  |  |
| 12021 RISING OAKS DRIVE EAST  |   |  |
| (Add  | lress)  |  |
| JACKSONVILLE FL 32223   |   |  |
| (City/State   | and Zip Code)   |  |
| For further information concerning this matter  | er, please call:  |  |
| ROBERT J. GOSSELIN, SR.  (Name of Contact Person)   | at ( 904 ) 923-7028 (Area Code & Daytime Telephone Number)  |  |
| Enclosed is a check for the following amount  | :   |  |
|   | \$43.75 Filing Fee & \$\begin{array}{l}\$\$52.50 Filing Fee, \\ Certified Copy & Certificate of Status & \\ (Additional copy is \\ enclosed) & (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  |                    |
|          | THINKPANDAS, INC   |                    |
| SECOND:  | The document number of the corporation (if known): P10000037181  |                    |
| ΓHIRD:   | The file date of the articles of incorporation: APR 29, 2010   |                    |
| 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.   | SECR!              |
| SEVENTH: | : Adoption of Dissolution (CHECK ONE)  | ETAR<br>HASS       |
|          | ✓ A majority of the incorporators authorized the dissolution.  | IO MAY -6 PH 1: 25 |
|          | A majority of the directors authorized the dissolution.  | TALE RICE          |
|          |  | es D               |
| Sign     | nature:  | - :6               |
|          | (By a director, president or other officer- if directors or officers have not been selected; by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) | - 11               |
|          | ROBERT J. GØSSELIN, SR.  |                    |
|          | (Typed or printed name of person signing)  |                    |
|          | INCORPORATOR   |                    |
|          | (Title of Person Signing)  |                    |

Filing Fee: \$35