

P11000058259

(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



900242893259

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13 JAN 14 AM 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 20, 2012

JENNIFER SPARKS  
VANTIX INDUSTRIAL SERVICES INC.  
1715 N. WESTSHORE BLVD. STE 920  
TAMPA, FL 33607 US

SUBJECT: VANTIX INDUSTRIAL SERVICES, INC.  
Ref. Number: P11000058259

We have received your document for VANTIX INDUSTRIAL SERVICES, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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) 245-6820.

Rebekah White  
Regulatory Specialist

Letter Number: 412A00030113

RECEIVED  
13 JAN 11 PM 12:06  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

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Regulatory Specialist

Letter Number: 412A00030113

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** P11000058259

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

Please return all correspondence concerning this matter to the following:

**Jennifer Sparks**

(Name of Contact Person)

**Vantix Industrial Services, Inc.**

(Firm/Company)

**1715 N. Westshore Blvd. Ste 920**

(Address)

**Tampa, FL 33607**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Jennifer Sparks**

(Name of Contact Person)

at **(813) 425-1390**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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

RECEIVED  
12 DEC 20 AM 10:49  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FILED  
13 JAN 14 11:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Vantix Industrial Services, Inc.

SECOND: The document number of the corporation (if known): P11000058259

THIRD: The date dissolution was authorized: December 06, 2012

Effective date of dissolution if applicable: December 31, 2012

(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)

Signature: X Ronnie L. Sparks  
(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)

Ronnie L. Sparks

(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: Vantix Industrial Services, 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:

Name(s), addresses and contact information of claimant, including but not limited to amount due,  
description of services/goods/materials and date services/goods/materials were provided.

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

1715 N. Westshore Blvd. Ste 920  
Tampa, FL 33607

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.

Ronnie L. Sparks

Printed Name of the Person Filing

X Ronnie L. Sparks  
Signature of the Person Filing

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