

P 13000023789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

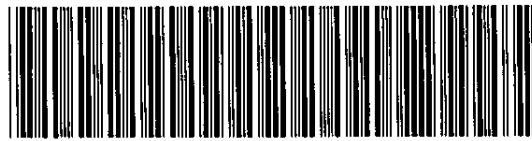
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600259123326

FILED
14 APR 18 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
14 APR 18 AM 10:54
DIVISION OF CORPORATION

VDW
APR 21 2014
R. WHITE



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 044775 7929189

AUTHORIZATION :

COST LIMIT :

\$ 35.00

A handwritten signature in black ink, appearing to read "Lorel Nelson", is written over the "AUTHORIZATION" and "COST LIMIT" fields.

ORDER DATE : March 7, 2014

ORDER TIME : 10:23 AM

ORDER NO. : 044775-010

CUSTOMER NO: 7929189

DOMESTIC FILINGS

NAME: LAWRENCE NELSON, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING .

CONTACT PERSON: Susie Knight - EXT# 52956

EXAMINER'S INITIALS: _____

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: LAWRENCE NELSON, INC.

SECOND: The document number of the corporation (if known): P13000023789

THIRD: The date dissolution was authorized: 04-17-2014

Effective date of dissolution if applicable: UPON FILING (no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

[X] 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: Lawrence P. Nelson (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)

Lawrence P. Nelson (Typed or printed name of person signing)

President (Title of person signing)

Filing Fee: \$35

FILED 14 APR 18 PM 10:50 STATE OF FLORIDA TALLAHASSEE, FLORIDA

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: LAWRENCE NELSON, INC.

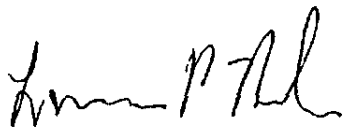
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

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

1208 E. ARQUES AVENUE #100
SUNNYVALE, CA 94085

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.

LAWRENCE A. NELSON 
Printed Name of the Person Filing Signature of the Person Filing

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