

P93000000414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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600245038766

02/27/13--01017--014 **52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIS
2-21-13

Resec, Inc.
4905 34th Street South, Suite 6500
St. Petersburg, FL 33711

December 31, 2012

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Resec, Inc. (E.I.N. 59-3165580)

Resec, Inc., wishes to apply to the Florida Department of State for dissolution under Section 607.1403, Florida Statutes.

Enclosed please find the Articles of Dissolution with \$52.50 filing fee.

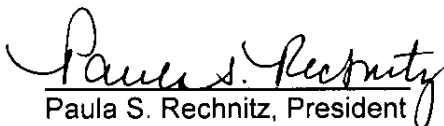
Also enclosed is a copy of the dissolution documents filed with the Internal Revenue Service. This includes IRS Form 966, Form 1120S FINAL, Minutes of Special Meeting of Directors, Waiver of Notice, Certificate, and the Plan of Liquidation.

If you have any questions regarding this matter, please contact our accountant, Stephanie G. Jacobson, CPA, of the firm Jacobson, P.C., at 617.423.1960.

Please acknowledge receipt of this letter on the enclosed duplicate copy and return to our accountant, Jacobson, P.C., in the self-addressed stamped envelope.

Your prompt attention to this matter is sincerely appreciated.

Respectfully,


Paula S. Rechnitz, President

Resec, Inc.
4905 34th Street South, Suite 6500
St. Petersburg, FL 33711

December 31, 2012

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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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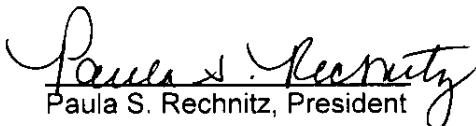
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Respectfully,


Paula S. Rechnitz, President

ACKNOWLEDGEMENT

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Resec, Inc.

DOCUMENT NUMBER: P93000000414

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

Please return all correspondence concerning this matter to the following:

Paula S. Rechnitz

(Name of Contact Person)

(Firm/Company)

4905 34th Street South, Suite 6500

(Address)

St. Petersburg, FL 33711

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie G. Jacobson, CPA at **(617) 423-1960**

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

Resec, Inc.

SECOND: The document number of the corporation (if known): P93000000414

THIRD: The date dissolution was authorized: December 31, 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: _____

(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)

Paula S. Rechnitz

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

13 FEB 27 PM 1:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA