

P94000015356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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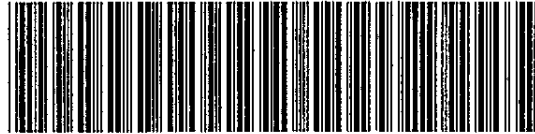
(Business Entity Name)

(Document Number)

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11/05/04--01014--015 **43.75

11-15-04

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04 NOV -5 PM 4:55
CLERK OF STATE
TREASURER, INDIANA

Att. of Diss.

11/16/04

Dc

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF MURPHY CONSULTING, INC.

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

PATRICIA R. MURPHY
(Name of Person)

MURPHY CONSULTING, INC.
(Name of Firm/Company)

521 WEDGEWOOD WAY
(Address)

NALES, FL 34119
(City/State/and Zip Code)

For further information concerning this matter, please call:

PATRICIA R. MURPHY at (410) 763-8412
(Name of Person) (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, Florida 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

11-15-04

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 Department of State:

MURPHY CONSULTING, INC.

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

THIRD: The date dissolution was authorized: 10/29/04

Effective date of dissolution if applicable: 11/15/04
(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 of 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)

Signed this 30th day of OCTOBER, 2004.

Signature: Patricia R. Murphy
(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)

PATRICIA R. MURPHY
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

Filing Fee: \$35

FILED
04 NOV -5 PM 4:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA