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Division of Corporations Public Access System

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Account Number : 119990000021 Phone : (904)356-2600

Fax Number : (904)355-0233

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BECRETARY OF STATE
ALLAHASSEE, FLORIDA

DISSOLUTION OR WITHDRAWAL

SYSTEM INNOVATORS, INC.

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Corporate Filing Menu

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ARTICLES OF DISSOLUTION

of

SYSTEM INNOVATORS, INC.

Pursuent to Section 607.1403, Florida Statutes, System Innovators, Inc., a Florida corporation, submits the following Articles of Dissolution:

ARTICLE I

The name of the corporation is System Innovators, Inc. (the "Corporation document number of the Corporation is P94000017211.

ARTICLE II

The dissolution of the Corporation was authorized as of February 18, 2009.

ARTICLE HI

The dissolution of the Corporation was approved by the shareholders of the Corporation holding one hundred percent of the issued and outstanding stock of the Corporation entitled to vote.

ARTICLE IV

Pursuant to Section 607.1407, Florida Statutes, a Notice of Dissolution of the Corporation is attached as EXMIBIT A.

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<u>ARTICLE V</u>

These Articles of Dissolution shall become effective on February 28, 2009, except that if these Articles are not filed by the Department of State of the State of Florida on or before such date, corporate dissolution shall become effective upon filing by the Department of State, and the corporation shall be dissolved as of such date.

Signed this 18th day of February, 2009.

Roger D. Nelson, President

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EXHIBIT A.

NOTICE OF DISSOLUTION

of

SYSTEM INNOVATORS, INC.

This Notice of Dissolution is submitted by System Innovators, Inc., a Florida corporation (the "Corporation"), to resolve and pay all unknown claims against the Corporation as provided in Section 607.1407, Florida Statutes.

ARTICLE I

The name of the Corporation is System Innovators, Inc.

ARTICLE II

The effective date of the dissolution, as specified in the Articles of Dissolution filed with the Department of State, is February 28, 2009.

ARTICLE III

Claims against the Corporation should be submitted to the address listed below.

The following information must be included in each claim:

- 1. The name, address and telephone number of the claimant, and the name, address and telephone number of the claimant's attorney, if any. If the claimant is not represented by an attorney, the preferred method by which the claimant may be contacted.
- A description of the claim, including a summary of the facts giving rise thereto and the claimant's reason to believe the Corporation is liable therefor.

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3. The harm suffered by claimant.

ARTICLE IV

Claims should be mailed to the Corporation at the following address:

System Innovators, Inc. 1031 1st Street South, 906 Jacksonville Beach, Florida 32250

ARTICLE V

Claims against the Corporation will be barred unless a proceeding to enforce the claim is commenced within four (4) years after the filing of this Notice of Dissolution.

Roger D. Nelson, President

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