795000025358

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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LANASSLE, FLORIDA

MAY 0 8 2014

C. CARROTETA ()

THE KARP LAW FIRM

A Professional Association

Elder Law • Estate Planning & Administration • Probate • Disability, Special Needs, Medicaid & Veterans Benefits Planning

Please Reply to: Palm Beach Gardens

JOSEPH S. KARP

Florida Certified Elder Law Specialist Certified Elder Law Attomey, Natl. Elder Law Foundation Member, FL & NY Bar

ADMINISTRATOR Audrey L. Yeager, CP

GENNY BERNSTEIN

Florida Certified Elder Law Specialist ADELE SMALL HARRIS

T. J. HEINEMANN, LL.M.

Of Counsel

RACHEL GOLDSTEIN ZETOUNI

April 28, 2014

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

RE: Articles of Dissolution

To Whom it May Concern:

Enclosed for filing, please find the following Articles of Dissolution for the following companies:

- 1. Westminster F&M, Inc.;
- 2. Albar Realty, Inc.;
- 3. Melbourne 150 Realty, Inc.;
- 4. Albar/Melbourne Realty, Inc.;
- 5. Westroads Realty, Inc.;
- 6. Management & Maintenance Services Co.;
- 7. Commercial Industrial Mold USA, Inc.;
- 8. United Funding Services, Inc.;
- 9. CIM Institute for Learning, Inc.;
- 10. Special Products, Inc.;
- 11. East Coast Line Sightseeing Company, Inc.;
- 12. TIBS, Inc.;
- 13. Juno Ocean Key Realty, Inc.;
- 14. The Mold Store, Inc.;
- 15. Ventures Worldwide Corporation; and
- 16. Juno Towne Plaza, Inc.

Also enclosed is this firms check #70374 in the amount of \$560.00 representing the filing fee for the above Articles of Dissolution.

Should you have any questions, or need anything further, please do not hesitate to contact our office.

Very truly yours,

Lynn Merone

Estate Planning Assistant Direct: (561) 472-7480

hunumense

Email: lmerone@karplaw.com

/lam

Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: TIBS, INC.		
DOCUMENT NUMBER: P95000	025358	
The enclosed Articles of Dissolution and i	fee are submitted for filing.	
Please return all correspondence concernin	g this matter to the following:	
CLAYTON A. SHACKL	ETON , , , , , , , , , , , , , , , , , , ,	
(Name of Contact Person)		
(Fin	m/Company)	
124 LAKESHORE DRIV	√E, PH 29	
(A	ddress)	
NORTH PALM BEACH	. FL 33408	
	ate and Zip Code)	
For further information concerning this ma	itter, please call:	
CLAYTON A. SHACKLETON	_{at (} 561 ₎ 254-9506	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	int:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	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: TIBS, INC.				
SECOND:	The document number of the corporation (if known): P95000025358				
BLCOND.		-			
THIRD:	The date dissolution was authorized: 4/16/2014	_			
	Effective date of dissolution if applicable: (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.	on			
	☐ 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				
	THE T				
	(voting group) APR 30 PH 12: 30 Signature:				
	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)				
	ALBERT H. SHACKLETON				
	(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.

Name of Corporation: TIBS, 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:

1. Name, address, telephone and email of the claimant;

2. Description of the claim - nature and amt. in controversy;

3. Secured or unsecured claim and nature of security;

4. Name, address, telephone and email of claimant's lawyer.

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

Clayton A. Shackleton
124 Lakeshore Drive, PH 29
North Palm Beach, FL 33408

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.

Albert H. Shackleton

Printed Name of the Person Filing

Signature of the Person Filing