

P96000064263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

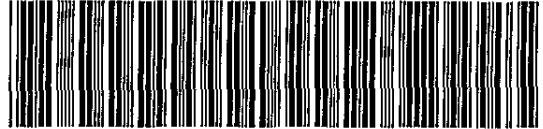
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 APR 20 PM 12:04

FILED

Dissolution

T BROWN APR 27 2005

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SECTION 607.1403, DISSOLUTION OF CORPORATION

DOCUMENT NUMBER: P96000064263

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

Please return all correspondence concerning this matter to the following:

MAUREEN MCMANUS

(Name of Person)

WILD MIND, INC.

(Name of Firm/Company)

93 DOGWOOD COURT

(Address)

TRYON, NC 28782

(City/State/and Zip Code)

For further information concerning this matter, please call:

MAUREEN MCMANUS

(Name of Person)

at (828) 894-8762

(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

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:

WILD MIND, INC.

SECOND: The document number of the corporation (if known): P96000064263

THIRD: The date dissolution was authorized: JANUARY 1, 2005

Effective date of dissolution if applicable: JANUARY 1, 2005
(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 1st day of April, 2005

Signature:

Maureen McManus

(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)

MAUREEN McMANUS

(Typed or printed name of person signing)

PRESIDENT AND REGISTERED AGENT

(Title of person signing)

Filing Fee: \$35

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA