

P98000000336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

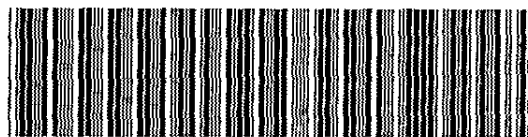
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600029453706

03/01/04--01031--001 **35.00

FILED
04 MAR 26 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ant Diss
10 3/26/04



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 9, 2004

KARL BECKMEYER
POST OFFICE BOX 2808
KEY LARGO, FL 33037-7808

SUBJECT: TIB SOFTWARE & SERVICES, INC.
Ref. Number: P98000000336

We have received your document for TIB SOFTWARE & SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 004A00015571

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TIB Software & Services, Inc.

DOCUMENT NUMBER: P98000000336

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

Please return all correspondence concerning this matter to the following:

KARL BECKMEYER

(Name of Person)

TIB BANK OF THE KEYS

(Name of Firm/Company)

599 9th STREET NORTH

(Address)

NAPLES, FL 34102

(City/State/and Zip Code)

For further information concerning this matter, please call:

KARL BECKMEYER

(Name of Person)

at (239) 659-5858
(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

FILED
04 MAR 26 PM 1:10
STATE (ANY OF) JALE
TALLAHASSEE, FLORIDA

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 Department of State:

TIB Software & Services, Inc.

SECOND: The document number of the corporation (if known): P98000000336

THIRD: The date dissolution was authorized: February 24, 2004

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.

☐ 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 22nd day of March, 2004

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)

Edward V. Lett

(Typed or printed name of person signing)

Chairman

(Title of person signing)

Filing Fee: \$35

FILED
04 MAR 26 PM 1:10
CLERK OF STATE
TALLAHASSEE, FLORIDA