P98000043359

(Re	questor's Name)	
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(Ad	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Oc	ocument Number)	
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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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FFECTIVE DATE

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SLURETARY OF STATE DIVISION OF CORPORATIONS

5-7-1-10) AL 1-1-10		
TO: Amendment Section Division of Carporations		
SUBJECT: Dissolution of Corp.		
DOCUMENT NUMBER: <u>F980000 43359</u>		
The enclosed Articles of Dissolution and fee are submitted for filling.		
Please return all correspondence concerning this matter to the following:		
GARY HIERS (Name of Contact Person)		
THERMAL SPECIALTIES		
P.O. 80× 9299		
Fleming Island FL 32006 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call.		
(Naryle of Contact Person) at (904) 509-8854 (Naryle of Contact Person) (Area Code & Daytime Telephone Number)		
Finclosed is a check for the following amount:		
\$35 Filing Fee \$\begin{array}{c} \text{S43.75 Filing Fee & } \\ \text{S43.75 Filing Fee & } \\ \text{Certificate of Status} \\ \text{Certificate of Status & } \\ \text{(Additional copy is enclosed)} \\ \text{Certified Copy} \\ \text{(Additional copy is enclosed)} \end{array}\$		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 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;
	THERMAL SPECIALTIES, INC.
SECOND:	The document number of the corporation (if known). Pa \$ 0000 43359
THIRD:	The date dissolution was authorized. JAN 24, 2005
	Effective date of dissolution if applicable FEB. 1, 2006 (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
	THE Business Owner Lister Below
	Signature: On a director, president or other officer - if directors or officers have not been selected, by an interpretation - if in the hands of a preciver, trustee, or other court appointed fiduciary, by that fiduciary GARY HERS (Typed or printed name of person signing)
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Filing Fee: \$35

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