

P99000063538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

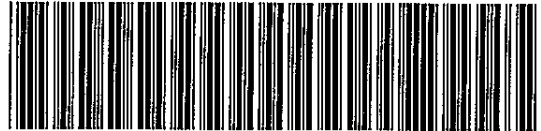
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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02/04/03--01020--024 \*\*52.50

RECEIVED  
ALLAHASSEE, FLORIDA

03 FEB -4 PM 3:06

FILED

B 2/7/03

JANUARY 31, 2003

DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

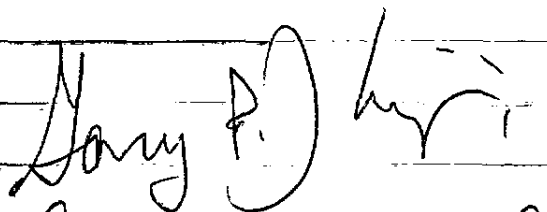
DEAR DOC:

I WISH TO DISSOLVE MY  
CORPORATION PER THE ATTACHED  
ARTICLES OF DISSOLVEMENT.

MY ADDRESS & TELEPHONE  
NUMBER IS:

GARY P. THIGPIN  
6245 GRISSOM PKWY  
COCOA, FLA 32927  
(321) 504-9806

THE ENCLOSED CHECK FOR  
\$52.50 IS FOR FILING FEE, CERTIFIED  
COPY OF DISSOLVEMENT, AND CERTIFICATE  
OF STATUS.

  
GARY P. THIGPIN, OWNER

ARTICLES OF DISSOLUTION

FILED

03 FEB -4 PM 3:06

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is: THIGPIN & ASSOCIATES INC.  
(FEI #593589178)

SECOND: The filing date of the articles of incorporation was: July 12, 1999

THIRD: (CHECK ONE)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

FOURTH: No debt of the corporation remains unpaid.

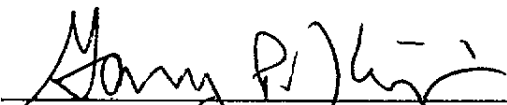
FIFTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SIXTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

Signed this 31 day of JANUARY, 2003.  
~~PLEASE MAKE EFFECTIVE FOR 31 DECEMBER, 2002.~~

Signature   
(By the chairman or vice chairman of the board, president, or other officer - if there are no officers or directors, by an incorporator.)

GARY P. THIGPIN  
(Typed or printed name)

OWNER

(Title)