

P99000071088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

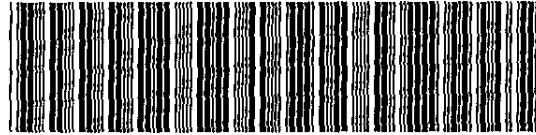
(Document Number)

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04 MAR 16 PM 1:10  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

March 11, 2004

Registration Section  
Division of Corporation  
P.O Box 6327  
Tallahassee, FL 32314

**RE: JIM FRENCH, INC.**

Dear Sir or Madam:

The enclosed "Articles of Dissolution" for the above named corporation and check in the amount of \$35.00 (Filing Fee) are submitted to pursuant in accordance with section 607.1403, of the Florida Statutes.

Please return all correspondence concerning this matter to the following:

**CARLYLE J. FRENCH**  
**7715 Greenboro Drive, Melbourne, FL 32904**

**For further information concerning this matter, please call: 321-722-9154.**

Sincerely,

  
Carlyle J. French

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CLERK OF STATE  
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:

JIM FRENCH, INC.

SECOND: The document number of the corporation (if known): P99000071088

THIRD: The date dissolution was authorized: 12/31/2003

Effective date of dissolution if applicable: 12/31/2003

(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 12TH day of MARCH, 2004

Signature: Carlyle J. French

(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)

CARLYLE J. FRENCH

(Typed or printed name of person signing)

DIRECTOR/ PRESIDENT

(Title of person signing)

Filing Fee: \$35

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA