

V60179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

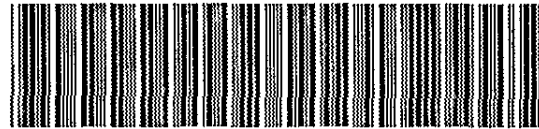
(Document Number)

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04 FEB 24 PM 1:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

IBIS PRESS, INC.
75 John Silver Drive
Key Largo, Fl 33037

Telephone: 520-744-4875

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Reference: Dissolution of the Corporation
IBIS PRESS, INC.
65-0362390

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

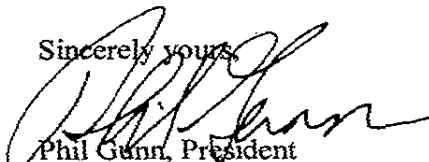
Dear Sir or Madam:

On December 31, 2003, the directors of IBIS PRESS, INC. voted to dissolve the Corporation.

Attached is the transmittal letter required to accomplish this dissolution?

Thank you for your consideration of the matter.

Sincerely yours,



Phil Gunn, President
IBIS PRESS, INC.

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:
IBIS PRESS, INC.

SECOND: The document number of the corporation (if known): 460179

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

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.

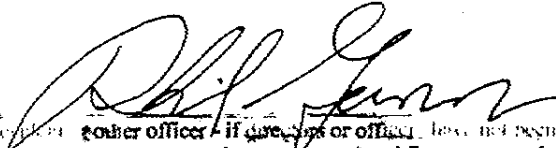
The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signed this 31st day of December, 2003

Signature:


By Phil Gunn, president or other officer, if director or officer, have not been selected by the corporation, or by the hands of its lawyer, trustee, or other court appointed fiduciary, or the Board of Directors.

Phil Gunn

(Typed or printed name of person signing)

President

(Title of person signing)

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TALLAHASSEE, FLORIDA
STATE PART OF STATE

Filing Fee: \$35