

DATE: 11/16/2012 DOCUMENT ID 201232001099

DESCRIPTION DISSOLUTION (DIS)

FILING

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Receipt

This is not a bill. Please do not remit payment.

TIBETAN MASTIFF PRESERVATION CLUB, INC. 8173 BALLASH RD MEDINA, OH 44256

## STATE OF OHIO CERTIFICATE

**Ohio Secretary of State, Jon Husted** 

2087715

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

TIBETAN MASTIFF PRESERVATION CLUB, INC.

and, that said business records show the filing and recording of:

Document(s)

DISSOLUTION

Document No(s):

201232001099



United States of America State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 15th day of November, A.D. 2012.

Ohio Secretary of State



# Form 560 Prescribed by: JON HUSTED Ohio Secretary of State

Central Ohio: (614) 466-3910
Toll Free: (877) SOS-FILE (767-3453)
www.OhioSecretaryofState.gov
Busserv@OhioSecretaryofState.gov

#### Mail this form to one of the following:

Regular Filing (non expedite) P.O. Box 1329 Columbus, OH 43216

Expedite Filing (Two-business day processing time requires an additional \$00.00).
P.O. Box 1390
Columbus, OH 43216

### **Certificate of Dissolution**

(Nonprofit, Domestic Corporation) Filing Fee: \$50

(139-DISM (Members) & 175-DIST (Directors))

Complete the following information.	G			
The corporation named below has adopted a resolution of	dissolution.			
Name of Corporation Transform Mastiff P	reservation Clus, Inc. 5			
Charter Number 20877.15.				
Location of Principal Office in Ohio				
الم	Y State			
Names and addresses of the directors.				
Charles Rapoliffe - President	Address Denver Co 30219			
Becky Hyatt - Vice Parsizent Name	4605 Other Rope, Dongeville, WT 53533			
Steve Williamson-TABASURER	B173 BALLASH ROAD, MEDINA, OH 44256 Address			

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ULP
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gent is an Ohio resident.
e than 90 days after the date
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6.					
	k the appropriate box and provide informa	- I			
0	The resolution of dissolution was adopted by the <b>Directors</b> . Pursuant to Ohio Revised Code section 1702.47(C), directors may adopt a resolution in the following cases, please check the box to state the proper statement of the basis for the adoption.				
	The resolution of dissolution was adopted:  Other the corporation has been adjudged bankrupt or has made a general assignment for the benefit of the creditors;				
	OBy leave of the court, when a receiver has been appointed in a general creditor's suit or in any suit in which the affairs of the corporation are to be wound up;				
	OWhen substantially all of the assets have	been sold at judicial sale or otherwise; or			
	OWhen the period of existence of the corporation specified in its articles has expired.				
•	The resolution of dissolution was adopted by the Members pursuant to Ohio Revised Code section 1702.47(D).				
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.					
officer 30 day any da upon v expirat as the whiche dissolu memb persor and ar of the	the signed by an authorized officer, unless the fails to execute and file the certificate within the safter the adoption of the resolution, or upon the specified in the resolution as the date which the certificate is to be filed, or upon the tion of any period specified in the resolution period within which the certificate is to be filed, ever is latest, in which event the certificate of ution may be signed by any three voting ers and shall set forth a statement that the as signing the certificate are voting members e filing the certificate because of the failure officers to do so.	Signature  By (if applicable)  Stever G. Williams of Print Name  Signature			
If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.  If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.		By (if applicable)			
		Print Name			
		Signature			
		By (if applicable)			
		Print Name			

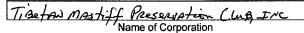
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#### Complete the information in this section.

#### **AFFIDAVIT**

In lieu of dissolution releases from various governmental authorities for a Nonprofit Corporation, (ORC section 1702.47(G)(3)).



The undersigned, being first duly sworn, declares that on the dates indicated below, each of the named state governmental agencies was advised IN WRITING of the scheduled date of filing of the Certificate of Dissolution and was advised IN WRITING of the acknowledgement by the corporation of the applicability of the provisions of section 1702.47 of the ORC.

**Date Notified** Agency **Date Notified** Agency Ohio Department of Taxation Ohio Job & Family Services Dissolution Section Status and Liability Section 4485 Northland Ridge Blvd. Data Correspondence Control Columbus, Ohio 43229 Fax: 614-752-4811 614-466-2319 Phone: Regular: Overnight: P.O. Box 182413 P.O. Box 182413 Columbus, OH 43218-2413 Columbus, OH 43218-2413

Note: This affidavit must be signed by a person executing the certificate of dissolution or by an officer of the corporation.

Signature Lew William	Title TREASURER
Steven 6. Williams op Name	
8 173 BAUASH Ra Mailing Address	
MEDINA City	OH         44256           State         Zip Code
alexanded in the form of an analysis and in the property of the second o	

Acknowledged before me and subscribed in my presence on

11-2-2012 Date



MARY L. GRANT Hory L. Grant STATE OF OHIONOTARY PUBLIC TO PUBLIC STATE OF OHIONOTARY Public

Commission Expires

1-16-13 Date

Recorded in Cuyahoga County My Comm. Exp. 1/16/13

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#### Complete the information in this section.

#### **AFFIDAVIT OF PERSONAL PROPERTY**

State of Ohio  County of MEDINA	SS:	
Steven 6, Williams Name of Officer	برم , being first duly sworn, depose	es and says that she/he is
The As usen Title of Officer	of TiBet ANM As his Name of Corporation	HPRESERVATion Clus
and this affidavit is made in compliance. That said corporation has: (Check one		hio Revised Code.
	ty in any county in the State of Ohio	
☐B. Personal property in	1 the following county(ies)	
·	e type required to pay personal property taxes  Title:	
Acknowledged before me and subscri	bed in my presence on Date //-1-1	212
MARY L. NOTARY STATE O Record Cuyahoge My Comm. E	GRANT PUBLIC FOHIO Hed in County	Grant
Expiration date of Notary Public's Con	nmission Date 1-16-13	
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