

DATE: 01/10/2013 DOCUMENT ID 201300900944

DESCRIPTION DISSOLUTION (DIS)

FILING

EXPED PENALTY

,

RT.

COPY

Receipt

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

THREE LINKS A GENCY INC BEN MCCOY PO BOX 2157 WESTERVILLE, OH 43086

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

1294194

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

THREE LINKS AGENCY, INC.

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

Document(s):

DISSOLUTION

Document No(s):

201300900944



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 8th day of January, A.D. 2013.

Ohio Secretary of State

for Housted



Form 561 Prescribed by: JON HUSTED **Ohio Secretary of State**

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

Makes checks payable to Ohio Secretary of State

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 \$100.00). P.O. Box 1390

Columbus, OH 43216

Certificate of Dissolution (For-Profit, Domestic Corporation) Filing Fee: \$50

Complete the following information.	E.
The corporation named below has adopted a resolution of dissolution.	26 8
Name of Corporation Three Cinho Agency Inc	2: Oh
Charter Number 1294194	
Location of Principal Office in Ohio	
City Genon Durship County	Ohio State
The internet address of each domain name held or maintained by or on behalf of the corporation:	
The corporation did not hold or maintain any domain names.	

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Name and address of the Statutory Agent.			
Bien McGy Name			
6474 Upper take Cincle			
City Chio 4308 > State Zip Code			
Please complete this section if the corporation is appointing a new agent.			
ACCEPTANCE OF APPOINTMENT			
The Undersigned, Statutory Agent Name ,named herein as the			
Statutory agent for, Corporation Name Corporation Name			
hereby acknowledges and accepts the appointment of statutory agent for said corporation.			
Statutory Agent Signature			
IAdividual Agent's Signature/Signature on Jehalf of Corporate Agent			
INERVIDUAL Agent s-signature/signature on benauter-Corporate Agent			
☐ If the agent is an individual using a P.O. Box, check this box to confirm the agent is an Ohio resident.			
The date of dissolution if other than the filing date MM/DD/YYYY			
Note: The date of dissolution must be on the date of filing, or a later date that is not more than 90 days after the date of filing, pursuant to Ohio Revised Code section 1701.86(F)(7).			
Pursuant to Ohio Revised Code section 1701.87(E), a copy of the notice required by Ohio Revised Code section 1701.87(B) must be attached to this filing. (Please attach the notice or complete page 5 of this form.)			

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Check only one box below and provide information as required:			
1701.86(C), if an initial stated capital was not set business, or if an initial stated capital is set forth	Incorporators. Pursuant to Ohio Revised Code section forth in the articles then before the corporation begins in the articles then before subscriptions to shares shall have capital, the incorporators or a majority of them may adopt, by on. (138-DISI)		
he names and addresses of all the incorporators must	be set forth below:		
G. Ray Smith			
Name	Address		
Name	Address		
Name	Address		
(D), directors may adopt a resolution of dissolution proper statement of the basis for the adoption. (1(2.) The resolution of dissolution was adopted:	on in the following cases, please check the box to state the 37-DISD)		
,	krupt or has made a general assignment for the benefit of		
By leave of the court, when a receiver has been which the affairs of the corporation are to be w	en appointed in a general creditor's suit or in any suit in yound up;		
	n sold at judicial sale or otherwise;		
	re to file annual franchise or excise tax returns or for failure ration has not been reinstated or does not desire to be		
C When the period of existence of the corporation	on specified in its articles has expired.		
$\widehat{V}(3.)$ The articles are hereby dissolved by the Shareho	olders pursuant to Ohio Revised Code section 1701.86(E).		
(150-DISS)			

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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.

Required

When the resolution is adopted by the incorporators, the certificate shall be signed by not less than a majority of the incorporators.

In all other cases, the certificate shall be signed by any authorized officer, unless the officer fails to execute and file such a certificate within 30 days after the date upon which such certificate is to be filed. In the latter event, the certificate may be signed by any three (3) shareholders or, if there are less than three (3) shareholders, all of the shareholders, form a statement that the persons signing the certificate are shareholders and are filing the certificate because of the failure of the officers to do so.

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.

Signapure Page 1

By (if applicable)

Remaid & Mclay

Print Name

Signature

Signature

Nach older

By (if applicable)

Bernard & McCoy
Print Name

Signature 2 Investor

Print Name

Notice of Dissolution to Creditors and Claimants against Corporation (pursuant to ORC 1701.87)

Notice of Dissolution of Thee Cinks Community Mame of Corporation

All claims shall be presented in writing and shall the claimant and contain sufficient information to reasonably inform the corporation of the substance of the claim.

The mailing address to which the person must send the claims is:

West quille Oh 12086
Address

The deadline by which the corporation must receive the claim

(May not be less than 60 days after

(May not be less than 60 days after the date the notice is given.)

The claim will be barred if the corporation does not receive the claim by the deadline.

The corporation may make distributions to other creditors or claimants, including distributions to shareholders of the corporation, without further notice to the claimant.

oc ID>	2013009009	44		
Complete the	e information in this		AFFIDAVIT	
	In lieu of dissoluti		governmental authorities (ORC	Section 1701.86(I)).
	,			
		Marce Links	of Corporation	
agencies was	advised IN WRITING	worn, declares that on th 3 of the scheduled date o	ne dates indicated below, each	of the named state governmental olution and was advised IN WRITING 1701.95 of the ORC.
Agency		Date Notified	Agency	Date Notified
Ohio Bureau Compensatio 30 W. Spring Columbus, O	n Street	12-19-12	Ohio Job & Family Services Status and Liability Section Data Correspondence Contro Fax: 614-752-481 Phone: 614-466-231	1
			Overnight: P.O. Box 182413 Columbus, OH 43218-2413	Regular : P.O. Box 182413 Columbus, OH 43218-2413
L		Agency	Date Notified	
		Ohio Department of Tax Dissolution Section 4485 Northland Ridge B Columbus, Ohio 43229	12-19-1=	2-
	fidavit must be signe the corporation.	d by one or more person	s executing the certificate of dis	resicle D
Name	road E	Mctoy		
Mailing Ad		ムコ		
City	oran, lle	Company of the Compan	State	<u>430</u> 86 Zip Code

Acknowledged before me and subscribed in my presence on

Seal

Notary Public

Commission Expires

Date

DEBORAH SCHULTZ Notary Public, State of Ohio My Commission Expires

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Complete the information in this section.

•	T OF PERSONAL PROPERTY Section 1701.86(H)(1))		
State of Ohio			
County of Debucroce			
Name of Officer SS:	, being first duly sworn, deposes and says that she/he is		
Title of Officer	of Name of Corporation George Inc		
and this affidavit is made in compliance with section	of the Ohio Revised Code.		
That said corporation has: (Check one (1) of the following) A. Has no personal property in any county in the State of Ohio B. Has personal property in the following county(ies)			
and that the net assets of said corporation are sufficient to pay all personal property taxes accrued to date.			
Signature:	Title: Tresiclest		
Asknowledged before the part of the strip and subsection to			
Acknowledged before me and subscribed in my pres	Date 13/19/13		
Seal	Notary Public		
DEBORAH SCHULTZ Notary Public, State of Ohio My Commission Expires			
Expiration date of Notary Public's Commission Da	te 11/2-1/2017		

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