



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
01/11/2013	201301001032	DISSOLUTION (DIS)	50.00	.00		.00	.00

Receipt

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

EMENS & WOLPER LAW FIRM CO. LPA
ONE EASTON OVAL
SUITE 550
COLUMBUS, OH 43219

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

468371

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

WICKFORD COMPANY, INC.

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

Document(s):
DISSOLUTION

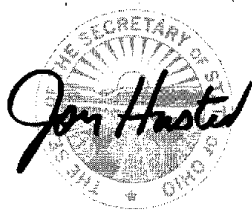
Document No(s):
201301001032



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 9th day of January, A.D.
2013.

Ohio Secretary of State



Form 561 Prescribed by:

JON HUSTED
Ohio Secretary of StateCentral Ohio: (614) 466-3910
Toll Free: (877) SOS-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 43216Expedite 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.

The corporation named below has adopted a resolution of dissolution.

Name of Corporation **WICKFORD COMPANY, INC.**Charter Number **468371**

Location of Principal Office in Ohio

PLAIN CITY

City

UNION

County

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.

CLERK OF COURT

2013 JAN -9 AM 8:18

OFFICE OF THE SECRETARY OF STATE

Name and address of the Statutory Agent.

Emens & Wolper Law Firm Co., LPA

Name

One Easton Oval, Suite 550

Address

Columbus

City

Ohio

State

43219

Zip Code

Please complete this section if the corporation is appointing a new agent.

ACCEPTANCE OF APPOINTMENT

The Undersigned, Beatrice E. Wolper, named herein as the
Statutory Agent Name

Statutory agent for, Wickford Company, Inc.
Corporation Name

hereby acknowledges and accepts the appointment of statutory agent for said corporation.

Statutory Agent Signature 
Individual Agent's Signature/Signature on behalf of 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 12/31/2012

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.

Check only one box below and provide information as required:

- ☐ (1.) The resolution of dissolution was adopted by the **Incorporators**. Pursuant to Ohio Revised Code section 1701.86(C), if an initial stated capital was not set forth in the articles then before the corporation begins business, or if an initial stated capital is set forth in the articles then before subscriptions to shares shall have been received in the amount of that initial stated capital, the incorporators or a majority of them may adopt, by a writing signed by them, a resolution of dissolution. (138-DISI)

The names and addresses of all the incorporators must be set forth below:

Name

Address

Name

Address

Name

Address

- ☐ (2.) The resolution of dissolution was adopted by the **Directors**. Pursuant to Ohio Revised Code section 1701.86 (D), directors may adopt a resolution of dissolution in the following cases, please check the box to state the proper statement of the basis for the adoption. (137-DISD)

The resolution of dissolution was adopted:

- ☐ When the corporation has been adjudged bankrupt or has made a general assignment for the benefit of the creditors;
- ☐ By 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;
- ☐ When substantially all of the assets have been sold at judicial sale or otherwise;
- ☐ When the articles have been canceled for failure to file annual franchise or excise tax returns or for failure to pay franchise or excise taxes and the corporation has not been reinstated or does not desire to be reinstated; or
- ☐ When the period of existence of the corporation specified in its articles has expired.

- ☒ (3.) The articles are hereby dissolved by the **Shareholders** pursuant to Ohio Revised Code section 1701.86(E). (150-DISS)

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.

Signature

By (if applicable)

Beatrice E. Wolper

Print Name

Signature

By (if applicable)

Print Name

Signature

By (if applicable)

Print Name

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

Notice of Dissolution of Wickford Company, Inc.
Name 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:

One Easton Oval, Suite 550
Columbus, Ohio 43219

Address

The deadline by which the corporation must receive the claim 3/10/13
(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.

Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities (ORC section 1701.86(I)).

Wickford Company, Inc.

Name of Corporation

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 1701.95 of the ORC.

Agency	Date Notified	Agency	Date Notified
Ohio Bureau of Workers' Compensation 30 W. Spring Street Columbus, Ohio 43215	12/15/12	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319 Overnight: P.O. Box 182413 Columbus, OH 43218-2413	12/15/12 Regular: P.O. Box 182413 Columbus, OH 43218-2413
Agency Ohio Department of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, Ohio 43229		Date Notified 12/15/12	

Note: This affidavit must be signed by one or more persons executing the certificate of dissolution or by an officer of the corporation.

Signature William T Mead Title President

William Mead
Name

2257 Abington Road
Mailing Address

Upper Arlington Ohio 43221
City State Zip Code

Acknowledged before me and subscribed in my presence on 1-8-13
Date

Seal

GAIL W. TIBBALS
NOTARY PUBLIC - STATE OF OHIO
Recorded in Franklin County
My commission expires June 23, 2015

Gail W. Tibbals
Notary Public

Commission Expires 06-23-15
Date

Complete the information in this section.

AFFIDAVIT OF PERSONAL PROPERTY
(ORC Section 1701.86(H)(1))

State of OHIO

County of Franklin

SS:

Priscilla Mead

Name of Officer

, being first duly sworn, deposes and says that she/he is

Chairman

Title of Officer

Wickford Company, Inc.

of

Name of Corporation

and this affidavit is made in compliance with section 1701.86 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:

Priscilla D. Mead

Title:

Chairman

Acknowledged before me and subscribed in my presence on

Date

12-12-12

Seal



BEATRICE E. WOLPER
Attorney at Law
Notary Public, State of Ohio
My Commission Has No Expiration
12/31/13 R.C. 147.03

Expiration date of Notary Public's Commission Date