

DATE: 08/23/2013 DOCUMENT ID 201323400941

DESCRIPTION DOMESTIC/DISSOLUTION (DIS)

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Receipt

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

DANIEL K. FRIEND, ATTORNEY AT LAW 3363 TREMONT ROAD SUITE 104-D COLUMBUS, OH 43221

STATE OF OHIO CERTIFICATE

Ohio Secretary of State, Jon Husted

1209780

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

GIBCO ONE, INC.

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

Document(s)

Document No(s):

DOMESTIC/DISSOLUTION

201323400941

Effective Date: 10/21/2013

SCRETARIO STATE

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 23rd day of August, A.D. 2013.

Ohio Secretary of State

for Hustel



Form 561 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

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 in	nformation.		
The corporation named	below has adopted a	resolution of dissolution.	
Name of Corporation	Gibco One, Inc.		
Charter Number	1209780		
_ocation of Principal Offi	ice in Ohio		
Columbus		Franklin	Ohio
City	A CONTRACTOR OF THE CONTRACTOR	County	State
he internet address of e	each domain name he	eld or maintained by or on behalf of the corpor	
			2013 AUG 22
	d not hold or maintain ar	ny domain names.	AH 11: 45

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Name and address o	of the Statutory Agent.			
Raymond L. Gibs	son Sr			
Name	Jon, Gr.			
98 Miami Avenue	a			
Address				
Columbus City		Ohio State	43203 Zip Code	
Please complete this	section if the corporation is appoint		t.	
	ACCEPTANCE OF APPO	DINTMENT		
The Undersigned,	Statutory Agent Name			named herein as the
Statutory agent for,	Corporation Name			
	and accepts the appointment of stat	tutory agent for	said corporation	on.
Statutory Agent Signat	Individual Agent's Signature/Sign	nature on behalf o	of Corporate Age	ent
☐ If the agent is a	n individual using a P.O. Box, ch	eck this box to	confirm the	agent is an Ohio resident.
The date of dissolution	n if other than the filing date 10/21/2	2013 D/YYYY		Leave to the second sec
	solution must be on the date of filing thio Revised Code section 1701.86		that is not mo	ore than 90 days after the date
	evised Code section 1701.87(E), a nust be attached to this filing. (Pl			

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Check only one box below and pro	ovide information as required:	
1701.86(C), if an initial stated business, or if an initial stated been received in the amount of	was adopted by the Incorporators . Pursuan capital was not set forth in the articles then capital is set forth in the articles then before of that initial stated capital, the incorporators solution of dissolution. (138-DISI)	before the corporation begins e subscriptions to shares shall have
The names and addresses of all the i	ncorporators must be set forth below:	
Name	Address	
Name	Address	
Name	Address	
Name	Address	
(D), directors may adopt a reproper statement of the basis(2.) The resolution of dissolution		, please check the box to state the
By leave of the court, when	a receiver has been appointed in a general poration are to be wound up;	creditor's suit or in any suit in
○When substantially all of the	e assets have been sold at judicial sale or o	therwise;
	en canceled for failure to file annual franchise axes and the corporation has not been reins	
OWhen the period of existen	ce of the corporation specified in its articles	has expired.
●(3.) The articles are hereby dissolv	ed by the Shareholders pursuant to Ohio R	Revised Code section 1701.86(E).
(150-DISS)		
	V	
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By signing and submitting this form to the Crequisite authority to execute this documen	Ohio Secretary of State, the undersigned hereby certifies that he or she has the nt.
Required When the resolution is adopted by the incorporators, the certificate shall be signed by not less than a majority of the incorporators.	Signature Signature
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	By (if applicable) Raymond L. Gibson, Sr., President Print Name Signature
of the officers to do so. f authorized representative s an individual, then they must sign in the "signature" pox and print their name n the "Print Name" box.	By (if applicable) Print Name
f authorized representative s a business entity, not an ndividual, then please print he 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) Print Name

Form 561

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

Notice of Dissolution of	One
	Name of Corporation
Name of Corporation creditor or any claim that is conditional, events, pursuant to the following:	an Ohio corporation (the "corporation") has dissolved. You must present to the corporation any claim against the corporation, including any claim by a unmatured, or contingent upon the occurrence or nonoccurrence of future
All claims shall be presented in writing reasonably inform the corporation of the The mailing address to which the personal contents.	
Address August Aug	
City Columbus	State Zip Code
2. The deadline by which the compaction	n manual manadius Alan alaima in aiste (COO) alanca after Alan alaka Alain makina in minam

- 3. The deadline by which the corporation must receive the claim is sixty (60) days after the date this notice is given (the "Deadline").
- 4. 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.

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Complete the information in this section.

AFFIDAVIT

In lieu of dissolution releases from various governmental authorities.

Gibco One, 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	08/15/2013	Ohio Job & Family Services Status and Liability Section Data Correspondence Control Fax: 614-752-4811 Phone: 614-466-2319	08/15/2013
*Only required for domestic for-pro	it corporations	Overnight: P.O. Box 182413 Columbus, OH 43218-2413	Regular: P.O. Box 182413 Columbus, OH 43218-2413
Agency	Date Notified		
Ohio Department of Taxation Dissolution Section 4485 Northland Ridge Blvd. Columbus, Ohio 43229	08/15/2013	The corporation is not required to pay or the ⊠ department of taxation has not assessed any personal property tax.	
Raymond L. Gibson, Sr. Name	nt Y Mkm	Title Preside	ent
98 Miami Avenue Mailing Address			L My a state of the state of th
Columbus City		OH State	43203 Zip Code
Acknowledged before me and subs	scribed in my presence o	0 () () ()	
Seal	Notary Public	Date Comm	1 1// / 1
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AFFIDAVIT OF PERSONAL PROPERTY

State of Ohio		
County of Franklin Raymond L. Gibson, Sr. Name of Officer		
President of	Gibco One, Inc.	
Title of Officer and that this affidavit is made in compliance with Section 17	Name of Corporation 01.86(H)(1) of the Ohio Revised Co	de.
That above-named corporation: (Check one (1) of the following Has no personal property in any county in Oh ☐ Is the type required to pay personal property	io	
Has personal property in the following county		
Signature Repum Shan	Title: President	
Acknowledged before me and subscribed in my presence or Seal	Date 3/15/13	
	Notary Public NOTARY PUBLIC—Since of the completion has no conformation for 147.03 d. d.	注: (4) (4) (4)
Expiration date of Notary Public's Commission Date		
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