

STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY ARTICLES OF DISSOLUTION GUIDELINES

20110323000092750 1/3 \$156.00
Shelby Cnty Judge of Probate, AL
03/23/2011 03:51:27 PM FILED/CERT

INSTRUCTIONS:

STEP 1: FILE ORIGINAL AND TWO COPIES WITH THE JUDGE OF PROBATE IN THE COUNTY WHERE THE ORIGINAL ARTICLES OF ORGANIZATION WERE FILED. ATTACH SECRETARY OF STATE AND JUDGE OF PROBATE FEES. THE SECRETARY OF STATE'S FILING FEE IS \$10. PLEASE CONTACT THE JUDGE OF PROBATE OFFICE TO VERIFY THEIR FILING FEES.

PURSUANT TO THE PROVISIONS OF THE ALABAMA LIMITED LIABILITY COMPANY ACT AND SECTION 10-12-37 OF THIS ACT, THE UNDERSIGNED DOMESTIC LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING ARTICLES OF DISSOLUTION.

- Article I* The name of the limited liability company:
Datapress Software LLC
- Article II* The date of filing of the articles of organization: 8/18/2008
- Article III* The reason for filing the articles of dissolution: death of single member
- Article IV* The dissolution was authorized by written consent of all members and effective on
March 23, 2011.
- Article V* Attach other information the members or managers filing the articles of dissolution deem appropriate.

3.23.2011
Date

Claudette Lovvorn, personal rep
Type or Print Member's Name and Title
Signature of Authorized Member


LETTERS OF ADMINISTRATION

THE STATE OF ALABAMA
COURT OF PROBATE

SHELBY COUNTY
CASE # PR-2010-000532

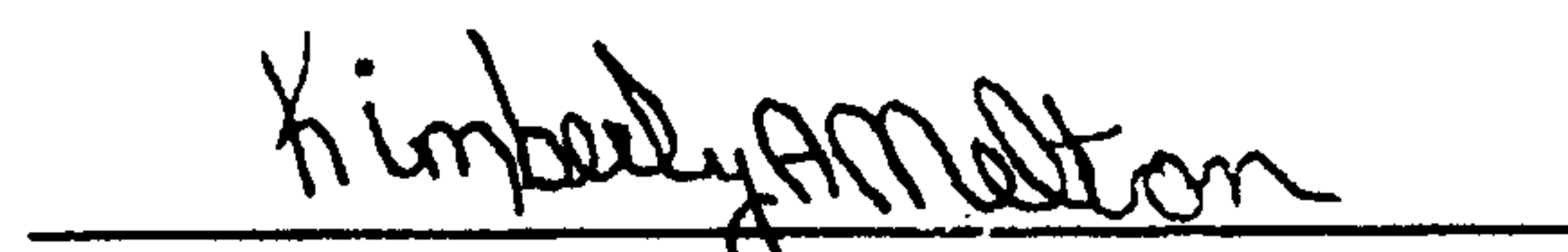
Letters of Administration on the estate of Clinton Shannon Mers, are hereby granted to Claudette Lavvorn, who has duly qualified and given bond in the amount of \$51,500.00 as such personal representative, and is authorized to administer such estate. Subject to the priorities stated in *Ala. Code, §43-8-76 (1975, as amended)*, the said personal representative, acting prudently for the benefit of interested persons, has all the powers authorized in transactions under *Ala. Code, §43-2-843 (1975, as amended)* subject to the following restrictions: **The Personal Representative is prohibited from settling litigation without prior order of this Court.**

WITNESS my hand and dated this 13th day of October, 2010.


James W. Fuhmeister
Judge of Probate

I, Kimberly A. Melton, Chief Clerk of the Court of Probate of Shelby County, Alabama, hereby certify that the foregoing is a true, correct and full copy of the Letters of Administration issued in the above styled cause as appears of record in said court. I further certify that said letters are still in full force and effect.

WITNESS my hand and dated this 13th day of October, 2010.


CHIEF CLERK

ALABAMA

Center for Health Statistics

20110323000092750 3/3 \$156.00
Shelby Cnty Judge of Probate, AL
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ALABAMA

CERTIFICATE OF DEATH

10-22876

State File Number 101

County
File
Number —

1. DECEASED—NAME First Middle Last (Type last name all capitals) Clinton Shannon MERS			2. DATE OF DEATH (Month, Day, Year) 06-10-2010		3. COUNTY OF DEATH Shelby	
4. CITY, TOWN, OR LOCATION OF DEATH AND ZIP CODE Birmingham 35242			5. INSIDE CITY LIMITS (Specify Yes or No) No		6. PLACE OF DEATH—HOSPITAL OR OTHER INSTITUTION—(If not in either, give street and number) 818 Greystone Highland Drive	
7. IF HOSPITAL (Specify Inpatient, ER or Outpatient, DONA) No			8. OF HISPANIC ORIGIN (Specify Yes or No) If Yes, Specify Cuban, Mexican, Puerto Rican, etc. No		9. RACE—(Specify American Indian, Black, White, etc.) White	
10. SEX Male			11. AGE 40 YRS.		12. UNDER 1 YEAR MOS. DAYS HOURS MINS.	
13. DATE OF BIRTH (Month, Day, Year) August 30, 1969			14. DECEASED'S SOCIAL SECURITY NUMBER [REDACTED]		15. EDUCATION (Specify ONLY highest grade completed below) Elementary or High School (0-12) 2	
16. MARITAL STATUS (Specify Married, Never Married, Widowed, Divorced) Divorced			17. SURVIVING SPOUSE (If wife, give maiden name) —		18. Was Decedent ever in Armed Forces (Specify Yes or No) Yes	
19. STATE OF BIRTH (If not in USA, name country) Virginia			20. RESIDENCE—STATE Alabama		21. COUNTY Shelby	
22. CITY, TOWN, OR LOCATION AND ZIP CODE Birmingham 35242			23. INSIDE CITY LIMITS (Specify Yes or No) Yes		24. STREET AND NUMBER 818 Greystone Highlands Dr.	
25. INFORMANT—Name and Address Ellen Ratmeyer 30 Church Rd. Selkirk, NY. 12158			26. USUAL OCCUPATION (Give kind of work done during most of working life span. If retired) Web Developer/Technology Specialist		27. KIND OF BUSINESS OR INDUSTRY Financial Services Firm	
28. FATHER—NAME First Middle Last Monty James Mers			29. MOTHER NAME OF MOTHER—First Middle Last Ellen Elizabeth Lovell		30. DISPOSITION OF BODY (Specify Burial, Cremation, Medical Donation, Hospital Disposal, Other) Cremation	
31. DATE OF DISPOSITION (Month, Day, Year) June 16, 2010			32. CEMETERY OR CREMATORY—Name Abanks Crematory		33. LOCATION—(City or Town—State) Birmingham, AL	
34. FUNERAL HOME—Name and Address Abanks Mortuary & Crematory 808 5th Ave. N. Birmingham, AL. 35203			35. FUNERAL DIRECTOR—Signature Allen Goodwin		36. DATE SIGNED BY FUNERAL DIRECTOR June 30, 2010	
37. — Certifying Physician (Physician certifying cause of death) "To the best of my knowledge death occurred at the time and date, and due to the cause(s) and manner stated." — Medical Examiner / Coroner "On the basis of examination and/or investigation, in my opinion, death occurred at the time, date, place, and due to the cause(s) and manner stated." Signature: Diana S. Hawkins			38. DATE SIGNED (Month, Day, Year) 07-02-2010		39. TIME AND DATE OF DEATH Found 14:38 06-10-10	
40. DATE AND TIME PROCLAIMED DEAD (For Coroner/M.E. use only) 06-10-10 14:38			41. NAME AND TITLE OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 40) Diana S. Hawkins—Coroner		42. ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (Item 40) P.O. Box 1321 Columbiana, AL. 35051	
43. REGISTRAR—Signature Catherine Molchan			44. DATE FILED (Month, Day, Year) July 9, 2010		45. CERTIFIER LICENSE NUMBER	

This is an official certified copy of the original record filed in the Center of Health Statistics, Alabama Department of Public Health, Montgomery, Alabama. 2010-291-843-9

Catherine M. Donald

Catherine Molchan Donald
State Registrar of Vital Statistics

July 16, 2010