L090000007956

(Re	equestor's Name)
(Ad	ldress)	
(Ad	ldress)	
· (Cit	iy/State/Zip/Pho	ne #)
	•	•
PICK-UP	WAIT	MAIL
L09-	isiness Entity Na 1956	nme)
(Do	cument Number	7)
Certified Copies	_ Certificate	es of Status
Special Instructions to	Filing Officer:	
L.		

Office Use Only



900166328549

01/21/10--01029--026 **25.00

FILED

OFEB-4 PH 4: 46

SEURLIARY OF STATE

AHASSEF FLORIDA

COVER LETTER

	on Section of Corporations
SUBJECT: Dra	(Name of Limited Liability Company)
The enclosed Artic	eles of Dissolution and fee(s) are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
N	lancy B. Drake
	(Name of Person)
D	rake World Wide Travel
	(Firm/Company)
1	105 Groveland Avenue (Address)
V	'enice, FL 34285
	(City/State and Zip Code)
For further informa	ation concerning this matter, please call:
Nancy	B. Drake at (941) 496-5121
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check f	for the following amount:
\$25.00 Filing Fee	30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



January 22, 2010

NANCY DRAKE 1105 GROVELAND AVENUE VENICE, FL 3482

SUBJECT: DRAKE WORLD WIDE TRAVEL LLC

Ref. Number: L09000007956

We have received your document for DRAKE WORLD WIDE TRAVEL LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the effective date of the limited liability company's dissolution.

The dissolution must be signed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 810A00001767

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED	
IU FEB -1, Du	•
SECKETARY OF STATE TALLAHASSEE, FLORIDA	

IALLAHASSEE, FLORID, and assigned document number
·
dissolution pursuant to section
y have been paid or discharged. abilities pursuant to s. 608.4421. s in accordance with their respective
ment, order or decree which may be
ecessary to approve the dissolution:
Printed Name
3. Drake

FILING FEE: \$25.00