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(Requestor's Name)			
(Address)			
((Address)			
(City/State/Zip/Phone #	<i>f</i>)		
PICK-UP	WAIT	MAIL		
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JUN 25 2015 **T CANNON**

COVER LETTER

TO: Amendment Section **Division of Corporations**

122

	orate Dissolution		
DOCUMENT NU	JMBER:		
The enclosed Arti	icles of Dissolution and	fee are submitted for filin	g.
Please return all co	orrespondence concernin	ig this matter to the follow	ving:
Patricia Holguin			
	(Name of	Contact Person)	
Universal Action Tra	vel Inc		
	· (Fir	m/Company)	
15010 Naturewalk D	rive		
	. (/	Address)	· · · · · · · · · · · · · · · · · · ·
Tampa, FL 33624			
	(City/Sta	ate and Zip Code)	
For further inform	ation concerning this ma	atter, please call:	
Patricia Holguin		at (at (
, (Name	of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a chec	k for the following amo	unt:	
■ \$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING	ADDRESS:	STR	EET ADDRESS:

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

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



Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Universal Action Travel Inc				
SECOND:	The document number of the corporation (if known):				
THIRD:	The date dissolution was authorized: May 30, 2015				
	Effective date of dissolution if applicable: May 30, 2015		_		
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, thi not be listed as the document's effective date on the Department of State's records.		will		
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes east for diss was sufficient for approval.	oluti	on		
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:	15	TAL TAL		
	The number of votes cast for dissolution was sufficient for approval by	JUN 15	CRETAR LAHASS		
	(voting group)	<u> </u>	. 변화 12년		
	· · · · · · · · · · · · · · · · · · ·	PH 12: 21	STATE TLORID/		
	Signature: Sho Ads		_		
	(By a director, president or officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)				
	Patricia Holguin				
	(Typed or printed name of person signing)		-		
	President				
	(Title of person signing)		_		