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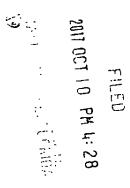
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
Certified Copies Certificates of Status
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C. GOLDEN

OCT 1 0 2017

COVER LETTER

Division of Corporations	
DOWLING HOTELS, INC.	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and t	fee are submitted for filing
Please return all correspondence concernin	g this matter to the following:
Michael Heath	
(Name of	Contact Person)
Law Offices of Michael J. Heath, PA	
(Fir	m/Company)
167 108th Avenue	
(A	(ddress)
Treasure Island, FL 33706	
(City/Sta	ate and Zip Code)
For further information concerning this ma	itter, please call:
Richard L. Dowling	at (⁷²⁷⁻⁵¹⁵⁻⁵⁹⁷²
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amou	int:
□ \$35 Filling Fee □ \$43.75 Filling Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED

Pursuant to of dissoluti	section 607.1403. Florida Statutes, this Florida profit corporation submiss the following articles on:
FIRST:	The name of the corporation as currently filed with the Florida Department of State: DOWLING HOTELS, INC.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: 09/28/2017
	Effective date of dissolution if applicable: 09/28/2017
	(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, this date will not be listed as the document's effective date on the Department of State's records.
FOURTH:	Adoption of Dissolution (CHECK ONE)
	Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
	☐ 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:
	The number of votes cast for dissolution was sufficient for approval by
	N/A
	(voting group)
	Signature:
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed tiduciary, by that fiduciary)
	Richard L. Dowling
	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution o against this corporation as provided in s. 607.1407, F.S.	f payment of unknown claims
This "Notice of Corporate Dissolution" is optional and is not required when filing	a voluntary dissolution.
Name of Corporation:	
Date of dissolution will be the date the dissolution is filed with the Department of Specified in the Articles of Dissolution.	nate or as
Description of information that must be included in a claim:	
Mailing address where claims can be sent: (Claims cannot be sent to the Division of	f Corporations)
Dowling, Richard L	
11800 Gulf Blvd	
Treasure Island, FL 33706	
A claim against the above named corporation will be barred unless a proceeding to within 4 years after the filing of this notice.	enforce the claim is commenced
	ì
Richard L. Dowling Printed Name of the Person Filing Signate	ine of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00