44/455

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SECRETARY OF STATE DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: DE PREE MOTELS INC.
DOCUMENT NUMBER: 441455
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
BARBARA D. CHERRY (Name of Person)
DE PREE MOTELS INC. (Name of Firm/Company)
(Name of Firm/Company)
3907 BAY SHORE RO (Address)
SARASOTA, FL 34234 (City/State/and Zip Code)
(City/State/and Zip Code)
For further information concerning this matter, please call:
BARBARA CHERRY at (941) 351 7906 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\text{\$\text{S35}\$ Filing Fee} \text{\$\}\$}}\$}\$\text{\$\text{\$\text{\$\text{\$\tex{
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution: The name of the corporation as currently filed with the Department of State: FIRST: DEPREE MOTELS, INC. The document number of the corporation (if known): 44/455 SECOND: The date dissolution was authorized: $\frac{12}{27}$ THIRD: Effective date of dissolution if applicable: Adoption of Dissolution (CHECK ONE) FOURTH: Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by of 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 Signature: (By a director, president or other officer - if directors or officers have not been selected, by an i neorporator if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) (Typed or printed name of person signing)

Filing Fee: \$35

Title of person signing)