

634290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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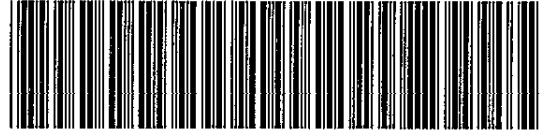
(Business Entity Name)

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03 JUN -3 PM 2:37
TALLAHASSEE, FLORIDA

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03 JUN -3 AM 11:20
RECEIVED
UNIVERSAL STATE
TALLAHASSEE, FLORIDA

CT CORPORATION

June 3, 2003

Secretary of State, Florida
409 East Gaines Street
Tallahassee FL 32399

Re: Order #: 5863180 SO
Customer Reference 1:
Customer Reference 2:

Dear Secretary of State, Florida:

Please file the attached:

Amusement Management Florida, Inc. (FL)
Dissolution
Florida

Enclosed please find a check for the requisite fees. Please return evidence of filing(s) to my attention.

If for any reason the enclosed cannot be filed upon receipt, please contact me immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Katrina Forsman

Katrina Forsman
Fulfillment Specialist
Katrina_Forsman@cch-lis.com

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

ARTICLES OF DISSOLUTION

FILED
03 JUN -3 PM 2:37
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: Amusement Management Florida, Inc.

SECOND: The date dissolution was authorized: April 22, 2003

THIRD: 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 vote 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

_____ (voting group)

Signed this 22nd day of April, 2003

Signature 
(By the Chairman or Vice Chairman of the Board, President, or other officer)

Alan R. Naul
(Typed or printed name)

President
(Title)