675479

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SECRETARY OF STATE

VILLAHASSEF F. STATE

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COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Dissolution of Corporation DOCUMENT NUMBER: 675479 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Harry Halme (Name of Contact Person) Tavan Corporation (Firm/Company) 5223 Del Prado Blvd S (Address) Cape Coral, Florida 33904-9718 (City/State and Zip Code) For further information concerning this matter, please call: Harry Halme (Area Code & Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee
☐\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is **Certified Copy** enclosed) (Additional copy is enclosed) **MAILING ADDRESS:** STREET ADDRESS: **Amendment Section** Amendment Section Amendment Section

Division of Corporations

Division of Corporations P.O. Box 6327 **Clifton Building** Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

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 Departmen	nt of State:	
	Tavan Corporation	- -	
SECOND:	The document number of the corporation (if known): 675479		
THIRD:	The date dissolution was authorized: 12 - 31 - 2007		
	Effective date of dissolution if applicable: (no more than 90 days after dissolu	tion file date)	
OURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cawas sufficient for approval.	ast for dissolu	tion
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting grout to vote separately on the plan to dissolve:	p entitled S	-7
	The number of votes cast for dissolution was sufficient for approval by	JAN 10 PM 2: PRETARY OF STA AHASSEE, FLOT	त्रव
	(woting Storb)	STATE LORIDA	
	Signature: ———————————————————————————————————		
	Harry Halme		
	(Typed or printed name of person signing)	_	
	President/Director		
	(Title of person signing)	-	

Filing Fee: \$35