684913

| (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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| James D. | Palermo | |
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| | · · · · · · · · · · · · · · · · · · · | |
| General Counsel | Senior Vice President | |

December 23, 2004

Amendment Section
Department of State
Division of Corporations
State of Florida
P. O. Box 6327
Tallahassee, Florida 32314

Re: Orlando West, Inc.

Gentlemen:

In connection with the dissolution of the referenced corporation, enclosed please find the following:

- > Original and copy of Articles of Dissolution;
- > Transmittal Letter; and
- Check, in the amount of \$43.75, made payable to the Florida Department of State, representing payment of the required filing fee and the fee for the return to my attention of a certified copy of the Articles of Dissolution.

Thank you for your cooperation.

Very truly yours,

JAMES D. PALERMO

JDP/ms Enclosures

TRANSMITTAL LETTER

TO: Amendment Section

| Division of Corporations |
|----------------------------------------------------------------------------------------------------------------------------------------------|
| |
| SUBJECT: Orlando West, Inc. |
| |
| DOCUMENT NUMBER, co.o. |
| DOCUMENT NUMBER: 684913 |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| |
| |
| James D. Palermo, Esq. (Name of Person) |
| (Name of Ferson) |
| DeBartolo Holdings, LLC |
| DeBartolo Holdings, LLC (Name of Firm/Company) |
| |
| 15436 North Florida Avenue, Suite 200 (Address) |
| (1.144.400) |
| Tampa, Florida 33613 |
| (City/State/and Zip Code) |
| For further information concerning this matter, please call: |
| To further information concerning this manual, produce con- |
| |
| James D. Palermo at (813) 908-8400 |
| (Name of Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| Deas Filling Day 1 PA2 75 Filling Foo & M 9A2 75 Filling Foo & D 952 50 Filling Foo |
| \$35 Filing Fee \$43.75 Filing Fee \$\$\$ \$43.75 Filing Fee \$\$\$ Certificate of Status \$\$\$ Certified Copy Certificate of Status \$\$\$ |
| (Additional copy is Certified Copy |
| enclosed) (Additional copy is enclosed) |
| enciosed) |
| MAILING ADDRESS: STREET ADDRESS: |
| Amendment Section Amendment Section |
| Division of Corporations P.O. Box 6327 Division of Corporations 409 E. Gaines Street |
| Tallahassee, Florida 32314 Tallahassee, Florida 32399 |

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 Department of State. |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Orlando West, Inc. |
| SECOND: | The document number of the corporation (if known): 684913 |
| THIRD: | The date dissolution was authorized: November 11, 2004 |
| | Effective date of dissolution if applicable: (no more than 90 days after dissolution flig daige) |
| 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 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 day of November, 2004 |
| | J |
| Signati | (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 fiduciary, by that fiduciary) |
| | James D. Palermo (Typed or printed name of person signing) |
| | (Typed of printed fiame of person signing) |
| | Assistant Secretary (Title of person signing) |