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PLEASE REPLY TO
Albany Office

OF COUNSEL
Angelo D. Lomanto

* Admitted in CA only

May 1, 2006

Our File No.: 2951.18857

MGI - Tropic Bus Sales, Inc. - Dissolution

Department of the Secretary of State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

CERTIFIED MAIL

Dear Sir or Madam:

Please be advised that this office represents Tropic Bus Sales, Inc., a Florida corporation, which seeks to dissolve in accordance with Section 607.1403 of the Florida General Statutes. Enclosed for filing please find an original and one copy of a duly executed Articles of Dissolution with cover letter together with a filing fee made payable to the Florida Secretary of State in the amount of \$30.00. An additional copy of these articles is also enclosed, which we respectfully request that you time stamp to acknowledge your receipt and filing of the original, for which we enclose a self-addressed, postage-paid envelope for your convenience.

We also respectfully request that you provide this office with confirmation that the corporation has been formally dissolved as soon as the original Articles of Dissolution have been filed and processed by your office.

If any additional information is needed, please do not hesitate to contact me.

Very truly yours,

MAYNARD, O'CONNOR, SMITH & CATALINOTTO, LLP

By


James R. Schultz
schultz@moscllp.com

JRS:mb/Enc./281883.1

COVER LETTER

279274.1

TO: Amendment Section
Division of Corporations

SUBJECT: voluntary dissolution of Tropic Bus Sales, Inc.

DOCUMENT NUMBER: unknown

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James R. Schultz, Esq.

(Name of Contact Person)

Maynard, O'Connor, Smith & Catalinotto, LLP

(Firm/Company)

6 Tower Place

(Address)

Albany, New York 12203

(City/State and Zip Code)

For further information concerning this matter, please call:

James R. Schultz

at (518)

65-3553

(Name of Contact Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|--|--|---|--|

MAILING ADDRESS:

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

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

279274.1

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 Department of State:

Tropic Bus Sales, Inc.

SECOND: The document number of the corporation (if known): _____

THIRD: The date dissolution was authorized: March 21, 2006

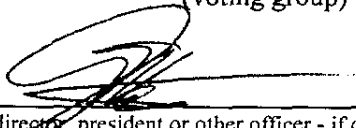
Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

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 for each voting group entitled to vote separately on the plan to dissolve:

(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 fiduciary, by that fiduciary)

Glenn J. Matthews
(Typed or printed name of person signing)

President
(Title of person signing)

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Filing Fee: \$35