## 489308

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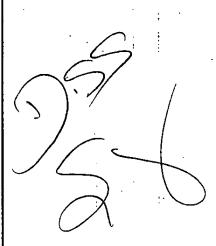
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## **COVER LETTER**

Division of Corporations
SUBJECT: SUPERIOR TRAVEL CENTER, INC.
DOCUMENT NUMBER: H89308
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
ANTHOM DIAZ
(Name of Contact Person)
(Firm/Company) 1909 MIDDLEBURY DRIVE
(Address)
TAMPA, FL 33626 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
ANTHOM DIAZ at (83) 39-5293  — (Name of Contact-Person) — (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\bigs\\$43.75 Filing Fee & \$\bigs\\$43.75 Filing Fee & \$\bigs\\$52.50 Filing Fee, Certificate of Status & Certified Copy & Certificate of Status & Certified Copy &
Division of Corporations P.O. Box 6327  Division of Corporations 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 Department of State:
	SUPERIOR TRAVEL CENTER, INC.
SECOND:	The document number of the corporation (if known): H89308
THIRD:	The date dissolution was authorized: 1-1-2010
	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 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)
S	Signature:  (By a director, president of 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)
	ANTHONY DIAZ
	(Typed or printed name of person signing)  PRESIDENT
	(Title of person signing)

Filing Fee: \$35