J38235

(Requ	uestor's Name)	
(Addr	ess)	
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(City/	State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section

Division of Corporations SUBJECT: Dissolve of Corporation DOCUMENT NUMBER: J38235 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jerry Roth (Name of Contact Person) CRUISES R US. INC (Firm/Company) 151 N Nob Hill Road (Address) Plantation, Florida 33324 (City/State and Zip Code) For further information concerning this matter, please call: at (954) 444-8209

(Area Code & Daytime Telephone Number) Jerry Roth (Name of Contact Person) Enclosed is a check for the following amount: ✓\$35 Filing Fee S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) STREET ADDRESS: **MAILING ADDRESS:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32314 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 S	tate:
	CRUISES R US, INC	
SECOND:	The document number of the corporation (if known): J38235	
THIRD:	The date dissolution was authorized: 4/1/2010	
	Effective date of dissolution <u>if applicable:</u> 4/30/2010 (no more than 90 days after dissolution file	datc)
FOURTH:	: Adoption of Dissolution (CHECK ONE)	10 ROS
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	dissofution
	Dissolution was approved by the shareholders through voting groups.	では、 では、 では、 には、 には、 には、 には、 には、 には、 には、 に
	The following statement must be separately provided for each voting group enti to vote separately on the plan to dissolve:	iled gr
	The number of votes cast for dissolution was sufficient for approval by	
	100% approved by directors	
	(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)	
	Jerry Roth	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation: CRUISES R US, INC '

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

This corporation has done no business since 1984 and will have no valid claims		
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)		

151 N Nob Hill Rd, Plantation, Fl 33324

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Printed Name of the Person Filing

Signature of the Person Filing