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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: HENDRY, STONER & BROWN, P.A.

Account Number : I20000000241 Phone

: (407)843-5880

Fax Number

: (407)425-7905

# LLC DISSOLUTION OR WITHDRAWAL PROMOTIONAL TRAVEL, LLC

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### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT:

## PROMOTIONAL TRAVEL, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

G. Steven Brown

(Name of Person)

Hendry, Stoner & Brown, P.A.

(Firm/Company)

20 N. Orange Avenue, Suite 600

(Address)

Orlando, FL 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

G. Steven Brown

(Name of Person)

407 \ 843-5880

Area Code & Daytime Telephone Nun

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

**MAILING ADDRESS:** 

Division of Corporations

Tallahassee, FL 32314

Registration Section

P.O. Box 6327

S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed):

STREET/COURIER ADDRESS:

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

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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is PROMOTIONAL TRAVEL, LLC		
2.	The Articles of Organization were filed on 02/22/20	05 and assigned	
	document number		
3.	The delayed effective date the dissolution if not effective date cannot be prior to or mo  Note: If the date inserted in this block does not meet the listed as the document's effective date on the Department	re than 90 days later than date document is received for filing) e applicable statutory filing requirements, this date will not	t be
4.	A description of occurrence that resulted in the limi 605.0707, Florida Statutes, (copy 605.0707 on back	ted liability company's dissolution pursuant to section cover letter).	תנ
	The consent of all the members.		
5.	If there are no members, enter the name and address activities and affairs:	s of the person appointed to wind up the company's	
	·	SECRETARY TALLAHASSE	2016 DEC 20
6. lis	Signature of an authorized person or if there are no sted above to wind up the company's activities and at	members, the signature of the person appointed and ffairs:	A 10: 02
ن	N. Stime Drown	G. Steven Brown, Authorized Representative  Printed Name	
	Signature	rmited ivalue	

**FILING FEE: \$25.00**