## 105000092344

(Requestor's Name)		
· (Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL.
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



700156006157

05/15/09--01035--043 \*\*25.00

05/15/09--01035--044 \*\*10.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

D. BRUCE

JUL 2 1 2009

**EXAMINER** 



May 20, 2009

BRUCE LO 751 NORTHLAKE BLVD NORTH PALM BEACH, FL 33408-5224

SUBJECT: OLYMPIA TRAVEL AND TOURS LLC

Ref. Number: L05000092244

We have received your document for OLYMPIA TRAVEL AND TOURS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 009A00017133

PILED

09 JUL 20 PH 4: 25

## **COVER-LETTER**

Division of Corporations				
SUBJECT: OLYMPIA TRAVEL AND TOURING LLC				
(Name of Limited Liability Company)				
The analoged Amieles of Disselution and foo(s) are submitted for filing				
The enclosed Articles of Dissolution and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
BRUCE LO				
(Name of Person)				
OLYMPIA TRAVEL AND TOURING LLC				
(Firm/Company)				
751 HORTH LAKE BLYD STE 1B				
751 NORTH LAKE BLVD STE 1B  (Address)  NORTH PALM BEACH, FLORIDA 33408-5724 20  (City/State and Zip Code)  For further information concerning this matter, please call:				
AP A				
NORTH PALM BEACH, FLORIDA 33408-5745 0				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
BRUCE LO at (561) 848-7705				
BRUCE LO at (5C1) 848- 7705  (Name of Person) (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee Certificate of Status  \$55.00 Filing Fee & Certificate of Status  Certificate of Status (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certificate of Status & Certificate Copy				
(additional copy is enclosed)				
MAILING ADDRESS: STREET/COURIER ADDRESS:				

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Registration Section

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

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is  OLYMPIA TRAVEL AND TOUR	RING LLC
2. The Articles of Organization were filed on SEPT	
3. The date the dissolution was approved:	liability company's dissolution pursuant to section
-OR- Adequate provision has been made for the deb  6. All remaining property and assets have been distributed rights and interests.	ited liability company have been paid or discharged.  Its, obligations and liabilities pursuant to s. 608.4421.  It among its members in accordance with their respective
7. CHECK ONE:  There are no suits pending against the compan-OR- Adequate provision has been made for the satientered against it in any pending suit.	y in any court. sfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of me	embership interests necessary to approve the dissolution:
Signature  Welst	Printed Name  BRUCE K. B.
	DI LAHASSEE, FLORIDA
	PH 4: 25 PH 4: 25 PH 4: 25