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## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT: Dissolution of Transit Safety Consulting Services Inc	f.			
DOCUMENT NUMBER:				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Albert W. Hartkorn				
(Name of Contact Person)				
Tranit Safety Consulting Services, Inc. (Firm/Company)				
1390 Ocean Drive-Saite 202 (Address)				
(Address)				
Mismi Brach, FL 33189 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Albert W. Hartkork at (3%) 538-4026  (Name of Contact Person) (Area Code & Daytime Telephone Number)				
(Name of Contact Person) (Area Code & Daytime Telephone Number)	,			
Enclosed is a check for the following amount:				
Stiling Fee Status Certificate of Status Certified Copy (Additional copy is enclosed)  Status Stiling Fee & Status Certified Copy (Additional copy is enclosed)  Status Certified Copy (Additional copy is enclosed)				
MAILING ADDRESS: STREET ADDRESS:				
Amendment Section Amendment Section				
	Division of Corporations			
P.O. Box 6327 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 o	f State:
	Transit Safety Consulting Services Inc	
SECOND:	The document number of the corporation (if known): 4 62567	
THIRD:	The date dissolution was authorized: $2-29-12$	
	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 was sufficient for approval.	for dissolution
	Dissolution was approved by the shareholders through voting groups.	
	The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve:	ntitled
	The number of votes cast for dissolution was sufficient for approval by	
	(voting group)	12 H
		SION OF SORPORAT
	Simon of that W Hatkon	7 85 S
	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)	SINIE Grations
	Albert W. Hertkork (Typed or printed name of person signing)	
	President (Title of person signing)	
	(Title of person signing)	

Filing Fee: \$35