

L98000000317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

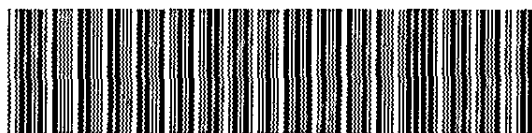
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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al

*After Hours Travel, L.L.C.*

17904 Cachet Isle Drive  
Tampa, FL 33647  
(813)986-5873 or 1-888-89RELAX  
Fax: (813)986-0925  
[Ctahaynes@aol.com](mailto:Ctahaynes@aol.com)

September 8, 2003

*To whom it may concern:*

*Please be advised that After Hours Travel, L.L.C. will be dissolving. Any further communication should use the fax/information line to leave a message. The email address listed above will also be in use.*

*Should you require additional information, please use one of the following methods to contact the undersigned.*

*Sincerely,*



Chonta T. Haynes  
President, After Hours Travel, LLC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

September 15, 2003

CHONTA HAYNES  
17904 CACHET ISLE DRIVE  
TAMPA, FL 33647

SUBJECT: AFTER HOURS TRAVEL, L.L.C  
Ref. Number: L98000000317

We have received your document for AFTER HOURS TRAVEL, L.L.C and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number two of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6020.

Tammi Cline  
Document Specialist

Letter Number: 603A00050984

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TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is After Hours Travel, L.L.C.

2. The effective date of the limited liability company's dissolution is

Sept. 15 2003 *effective decision Sept.*

3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to Section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

agreement of all members to dissolve at this time.

4. **CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

6. **CHECK ONE:**

☒ There are no suits pending against the company in any court.  
-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Chonta J. Haynes  
Eric R. Haynes

Typed or Printed name

Chonta T.A. Haynes  
Eric R. Haynes

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**Filing Fee: \$25.00**