	I
•	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-	UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	ns to Filing Officer:
	Office Use Only

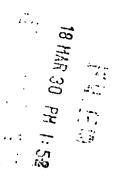


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R. WHITE MAR 02 2018



COVER LETTER

TO: Amendment S Division of Co			
SUBJECT:	HOST, IN	C.	
DOCUMENT NUMBI	ER: <u>PO 10</u>	00065991	
The enclosed Articles of	f Dissolution and f	ee are submitted for f	iling.
Please return all corresp	ondence concerning	g this matter to the fol	lowing:
	DONA-LO L.	STILLER	
	(Name of	Contact Person)	
	(Firr	m/Company)	
3	575 ELEVE	EN MILE RD	
	(A	ddress)	
	FORT PIERCE,	FL 3.4945	
	(City/Sta	te and Zip Code)	
For further information	concerning this ma	tter, please call:	
DONALO L.	STILLER	at (772	- 201-7679
(Name of Co		 \	e) (Daytime Telephone Number)
Enclosed is a check for	the following amou	int:	
□ \$35 Filing Fee □ \$4 Ce	3.75 Filing Fee & rtificate of Status	□ \$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	& \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADD Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations	A D C 20	mendment Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution The name of the corporation as currently filed with the Florida Department of State: FIRST: HOST, INC The document number of the corporation (if known): PC 100006599 i SECOND: The date dissolution was authorized: MARCH 30, 2016 THIRD: Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. FOURTH: Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval. Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve: The number of votes cast for dissolution was sufficient for approval by NUNALD L. STILLER (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) (Typed or printed name 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.

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This " <i>Notice o</i> j	*Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corpo	ration: HOST, INC
	tion will be the date the dissolution is filed with the Department of State or as Articles of Dissolution.
Description of	information that must be included in a claim:
;	
Mailing addres	where claims can be sent: (Claims cannot be sent to the Division of Corporations)
	3575 ELEVEN MILE RD
	FORT PIERCE PL J4945
	the above named corporation will be barred unless a proceeding to enforce the claim is commenced after the filing of this notice.
De	NAW L. STILLER (MOD) Holl
	Printed Name of the Person Filing Signature of the Person Filing
-	

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00