P0200052796

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bı	isiness Entity Nar	ne)
(Document Number)		
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COVER LETTER

TO: Amendment Section

Division of Corporations		
SUBJECT: PELICAN ACRWAYS ENTERPRISES INC		
DOCUMENT NUMBER: P02 0000 52796		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
CART T. A. REMISOME		
(Name of Contact Person)		
PECICAN AIRWAYS ENTERPRISES INC		
(Firm/Company)		
10341 Nw 18PL (Address)		
PEMBROKE PINES FC 33006		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
CAPT TA FINSOME at (954) 448-0197 (Name of Contact Person) (Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$\sum \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

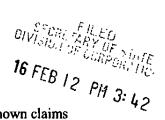
ARTICLES OF DISSOLUTION

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 of State:				
	PELICAN AIRWAYS ENTERPRISES INC				
SECOND:	The document number of the corporation (if known): $\frac{60200052}{1000052}$ The date dissolution was authorized: $\frac{DECEMBER 17,2015}{1000052}$	796			
THIRD:	The date dissolution was authorized: DECEMBER 17, 2015				
	Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution file date)				
	Note: If the date inserted in this block does not meet the applicable statutory filing requirement not be listed as the document's effective date on the Department of State's records.	nts, this date will			
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cast for was sufficient for approval.	or dissolution			
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve:	titled			
	The number of votes cast for dissolution was sufficient for approval by	ny factor (FEB 17			
	(voting group)	2 PM			
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by	3:42			
	(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				
	(APT T A KEN SOME (Typed or printed name of person signing)				
	(Typed or printed name of person signing)				
	DIRECTOR PRESIDENT				
	(Title 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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: PELICAN AIRWAYS ENTERPRISES INC
P 120000 5279
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
(b) THE AMOUNT OF THE CLAIM AND ITEMIZED TNIEREST
(6) THE AMOUNT OF THE CLAIM AND ITEMIZED TNIEREST
AND PRINCIPAL AND OTHER CHARGES CLAIMED.
CO) THE DATE THE CLAIM AROSE AND THE NATURE OF CLAIM.
Mailing address where alains can be controllained connect be contact the Division of Compositions)
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
LAW OFFICE OF CHARLES J ZIMMERER PA
1501 VENERA AVE SUITE 300
CORALGABLES FL 33146
(786) 464-0403
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
mM add
-UVA 1.18/91/
Printed Name of the Person Filing Signature of the Person Filing
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