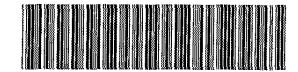
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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Coples	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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2003 SEP 22 AM II: 56

Dissolution LFT 10-2-03

Untitled

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

P.O.BOX 6327 TALLAHASSEE,FL 32314

SEPTEMBER 18, 2003

DEAR OFFICER:

PLEASE, FIND THE ENCLOSED FORM FOR DISSOLUTION OF A FLORIDA PROFIT CORPORATION AND FILING FEE. PLEASE, FORWARD TWO CERTIFIED COPIES OF THE DISSOLUTION TO MY RETURN ADDRESS. THANK YOU FOR YOUR COOPERATION.

SINCERELY

TRANSPOLITAN INC./ZIYA K. KORAY 501 LINDELL BLVD.

DELRAY BEACH, FL 33444

TEL. (561)716-5029/274-2201

ARTICLES OF DISSOLUTION

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2003 SEP 22 AM 11: 56

Pursuant to 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: Tans partition nc.
SECOND:	The filing date of the articles of incorporation was: 11/11/29, 200 (CHECK ONE)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FOURTH:	No debt of the corporation remains unpaid.
FIFTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SIXTH:	Adoption of Dissolution (CHECK ONE)
	☐ A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Si	ened this 18 day of Soptimber 2003
Signatu	(By the charman of ite charman of the board, president, or other officer - if there are no officers or directors, by an interporator.)
	(Typed or printed name)
	Incorporator President