## 000062650

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Dissolution w/Notice

Office Use Only

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## **COVER LETTER**

**TO:** Amendment Section

Tallahassee, Florida 32314

**Division of Corporations** 

SUBJECT: Articles of Dissolution DOCUMENT NUMBER: P03000062650 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: David Herring (Name of Person) Florida Best Express, Inc. (Name of Firm/Company) 4758 West Commercial Blvd. (Address) Ft. Lauderdale, FL 33319 (City/State/and Zip Code) For further information concerning this matter, please call: at (\_<sup>954</sup> Debbie Hibshman (Name of Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ■ \$35 Filing Fee ■ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & ■ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **MAILING ADDRESS: STREET ADDRESS:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 409 E. Gaines Street

Tallahassee, Florida 32399

## 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:				
	Florida Best Express, Inc.				
SECOND:	The document number of	the corporation (if known): Po	3000062650	<b>л</b>	
THIRD:	The date dissolution was authorized: 12/31/04				
	Effective date of dissolution	on if applicable: 12/31/04 (no more than 9	3000062650  O days after dissolution file date)		
FOURTH:	Adoption of Dissolution (	CHECK ONE)	CORION TO THE CORNER OF THE CO	28	
	<ul> <li>Dissolution was appro- dissolution was suffici</li> </ul>	ved by the shareholders. The nent for approval.	number of votes cast for		
	☐ Dissolution was approved by of 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 c	ast for dissolution was sufficient	ent for approval by		
		(usting group)			
		(voting group)			
	Signed this 18	day of March	, 2005		
	Signature:  (By a director, an incorporate that fiduciary)	president or other officer if directors or - if in the hands of a receiver, trustee,	or officers have not been selected, by or other court appointed fiduciary, by		
	David Herring				
		(Typed or printed name of person sign	ning)		
	Secretary				
		(Title of person signing)		i	

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: Florida Best Express, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Voluntary Dissolution Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Florida Best Express, Inc. 4758 West Commercial Blvd. Ft. Lauderdale, FL 33319 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.

Signature of the Person Filing

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

**David Herring** 

Printed Name of the Person Filing