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TALLAHASSEE, FLORIDA

100 DISSIN

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: DISSOLUTION OF COMPANY
DOCUMENT NUMBER: P040000163311
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
THINH MCCOMBS
(Name of Person)
ORLANDO HAUNTED HISTORY TOURS
(Name of Firm/Company)
2812 DELLWOOD DR
(Address)
OPIANDO FI 3290V-
OPLANDO, FL 32806 (City/State/and Zip Code)
For further information concerning this matter, please call:
THINH "TING" MCCOMBS at (407) 325-1666
(Name of 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 \$\sum (Additional copy is enclosed) \$\sum (Additional copy is enclosed)\$\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

ARTICLES OF DISSOLUTION

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

FIRST:	The name of the corporation as currently filed with Department of State:
_	ORLANDO HAUNTED HISTORY TOURS, INC
SECOND:	The document number of the corporation (if known): P\$40000016331
THIRD:	The file date of the articles of incorporation was: 415 04
FOURTH:	(CHECK AT LEAST ONE BOX)
	□ None of the corporation's shares have been issued. □
	None of the corporation's shares have been issued. The corporation has not commenced business. No debt of the corporation remains unpaid.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	☐ A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
	Signed this 12 day of May , 2004 .
Signatı	Ire: (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.)
	T. MCCOMBS (Typed or printed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35