P04000146136

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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

SUBJECT: TAMPA PUB, INC.			
·			
DOCUMENT NUMBER: P04000146136			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
•			
Judy Sherman			
(Name of Contact Person)			
STILES CORPORATION			
(Firm/Company)			
300 S.E. 2nd Street			
(Address)			
Fort Lauderdale, FL 33301			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
3			
<u>Judy Sherman</u> at (<u>954</u>) <u>627-9156</u>			
(Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
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MAILING ADDRESS: Amendment Section STREET ADDRESS: Amendment Section			

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

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 Department of Sta	ite:	ज ै:	
	TAMPA PUB, INC.		- N	, market
SECOND:	The document number of the corporation (if known): P04000146136		91 NON 6	
THIRD:	The date dissolution was authorized:11/1/2010		7	
	Effective date of dissolution <u>if applicable:</u> (no more than 90 days after dissolution	File date	ंगः।	
FOURTH:	Adoption of Dissolution (CHECK ONE) Dissolution was approved by the shareholders. The number of votes or was sufficient for approval.			ior
	☐ Dissolution was approved by of the shareholders through voting group	os.		
	The following statement must be separately provided for each voting g vote separately on the plan to dissolve:	roup e	ntitled t	'0
	The number of votes cast for dissolution was sufficient for approval by	y		
Signati	Signed this day of,	~ -••		
	(By a director, president or other office - if directors or officers have not been selected, by an if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	ncorpora	tor –	
	Rocco Ferrera	_		
	(Typed or printed name of person signing)	*		
	Vice President	_		-
	(Title of person signing)			

Filing Fee: \$35