## POS00005593

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(-13, -1-1-, , , , , , , , , , , , , , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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02/17/06--01036--018 \*\*43.75

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION:	AIRPANUES JU	<u> </u>
DOCUMENT NUMBER: PO 58000	15593	
The enclosed Articles of Amendment and fee as	re submitted for filing.	
Please return all correspondence concerning this	_	
James Wysers (Name of	۸	
(Name o	of Contact Person)	
ondervareal		
(Fir	m/ Company)	<del></del>
PO BOX 507	732	
-	(Address)	· · · · · · · ·
Ot myar Fl	33994 ate and Zip Code)	
For further information concerning this matter,	•	
1.	picase can.	
Janus Werne	at ( <u> </u>	1832
(Name of Contact Person)	(Area Code & Daytime	(Telephone Number)
Enclosed is a check for the following amount:		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section	Street Address Amendment Section	. •

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## 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 the Florida Department of State:
	ABA BIRPLANES INC
SECOND:	The document number of the corporation (if known): $P050005593$ The file date the articles of incorporation: $1/11/2005$
THIRD:	The file date the articles of incorporation: $1/11/2cs=$
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	☐ The corporation has not commenced business.
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.
Sign	ature:    Many   Many
	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: AAA AIRPLANES INC		30
Date of dissolution will be the date the dissolution is filed with the Department specified in the Articles of Dissolution.	at of State or as	• `
Description of information that must be included in a claim:		
PESCITIPATOR OF SERVICES		
AUTISOKIZED BY		
TOTAL AMOUNT DUE		· · · · · · · · · · · · · · · · · · ·
Bill MATE		
DIA DATA.	<u> </u>	· ·
		-
Mailing address where claims can be sent: (Claims cannot be sent to the Divis	ion of Corporations)	-
Mailing address where claims can be sent: (Claims cannot be sent to the Divisor of the Divisor o	ion of Corporations)	
Mailing address where claims can be sent: (Claims cannot be sent to the Divisor Do Box 50819  My Ens M 33994	sion of Corporations)	
Mailing address where claims can be sent: (Claims cannot be sent to the Divisor Do Box 50819  My Ens on 33994	sion of Corporations)	
Mailing address where claims can be sent: (Claims cannot be sent to the Divisor of the Divisor o	sion of Corporations)	
PO BOX 50819  MY ENS PL 33994  A claim against the above named corporation will be barred unless a proceeding the state of		ommenced
PO BOR 50819  MY ENS ON 33994		ommenced

Printed Name of the Person Filing