

POS000015526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

(Business Entity Name)

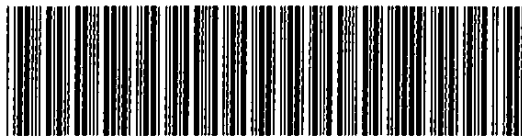
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DSS  
[Signature]



WILLIAMS MULLEN

Direct Dial: 757.473.5340  
smunroe@williamsmullen.com

January 25, 2008

030639.0001

By UPS Next Day Air

Florida Department of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

Re: Gold Mind Tours, Inc.

Dear Sir or Madam:

Please file the enclosed Articles of Dissolution on behalf of the above referenced corporation. A check in the amount of \$43.75 is enclosed for the filing fee and certified copy. Please forward the certified copy and any acknowledgement to my attention as soon as possible.

If you have any questions, please do not hesitate to contact me. Thank you for your attention to this matter.

Very Truly Yours,

Stacy F. Munroe  
Corporate Paralegal

Enclosures

cc: M. Nicole Williams

*A Professional Corporation*

## 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:

Gold Mind Tours, Inc.

SECOND: The document number of the corporation (if known): P05000015526

THIRD: The date dissolution was authorized: January 15, 2008

Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by 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 cast for dissolution was sufficient for approval by

unanimous written consent of sole shareholder

(voting group)

Signature: \_\_\_\_\_

(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)

Melissa Elliott

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

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TALLAHASSEE, FLORIDA