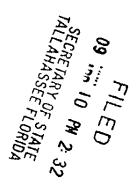
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COVER LETTER

TO:	Amendment Section Division of Corporations				
	Division of Corporations		•		
SUBJECT: DISSOLUTION OF CORPORATION					
DOC	UMENT NUMBER: P0500	00121317			
The er	nclosed Articles of Dissolution	and fee are submitted for	or filing.		
Please	Please return all correspondence concerning this matter to the following:				
NOF	NORICE CAMPBELL (Name of Contact Review)				
	(Name of Contact Person)				
TRAILWAY CRUISER LTD INC					
		(Firm/Company)			
5105	BAYBERRY LANE				
	regional research	(Address)	And the second of the second o		
FOR	T ALUDERDALE, FLC	RIDA 33319			
(City/State and Zip Code)					
For fu	For further information concerning this matter, please call:				
		,			
NOF	RICE CAMPBELL	at (954	806-4243		
	(Name of Contact Person) (Area Code & Daytime Telephone Number)				
Enclos	sed is a check for the following	g amount:			
 \$35	Filing Fee \$\sum \$\\$43.75 \text{ Filing F} \\ Certificate of St		Fee & \$\int_\$\$52.50 Filing Fee, Certificate of Status & y is Certified Copy (Additional copy is enclosed)		
en	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF DISSOLUTION

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

orida Department of State:	FIRST: The
	TR
5000121370	SECOND: The
)5	THIRD: The
	FOURTH: (CI
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p have been distributed 3.	SIXTH: The to the
O PM	SEVENTH:
lissolution.	
lution.	
t been selected, by an incorporator - if	Signature
that fiduciary.)	, ,
p have been distributed by an incorporator - if	THIRD: The FOURTH: (CI

Filing Fee: \$35