

PD6000062522

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200127347842

05/01/08--01035--002 **87.50

FILED
08 MAY - 1 AM 10 19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D.S.S/notice

517 38

A1A Outparcel Corp.
8959 Astronaut Blvd.
Cape Canaveral, FL 32930

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

4/30/08

To whom it may concern,

Please find enclosed:

[a] Certificate of Dissolution for **A1A Outparcel Corp.** (the General Partner of A1A Outparcel Group LLLP

[b] Notice of Dissolution for **A1A Outparcel Corp.**

[c] Certificate of Dissolution for **A1A Outparcel Group LLLP**

[d] Notice of Dissolution for **A1A Outparcel Group LLLP**

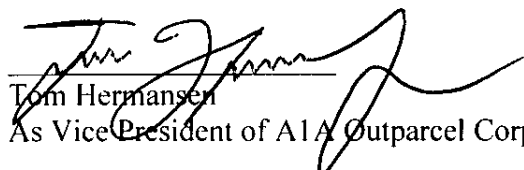
[e] A check for \$87.50 made out to Florida Department of State for the total fees of dissolving both entities.

Should you have any questions regarding the above, please call me at 941-587-2808.

Thank you for your kind assistance,

Sincerely,

By:


Tom Hermansen
As Vice President of A1A Outparcel Corp. (Gen Partner)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of A1A Outparcel Corp. Inc

DOCUMENT NUMBER: P06000062522

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tom C. Hermansen

(Name of Contact Person)

A1A Outparcel Corp.

(Firm/Company)

8959 Astronaut Blvd

(Address)

Cape Canaveral, FL 32920

(City/State and Zip Code)

For further information concerning this matter, please call:

Tom C. Hermansen

(Name of Contact Person)

at (941) 587 2808

(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
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 607.1403, 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:

A1A Outparcel Corp.

SECOND: The document number of the corporation (if known): P06000062522

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

Effective date of dissolution if applicable: April 30, 2008

(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

(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)

Tom C. Hermansen

(Typed or printed name of person signing)

Vice President

(Title of person signing)

Filing Fee: \$35

FILED
08 MAY - 1 AM 10:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: AIA OUTPARCEL CORP

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

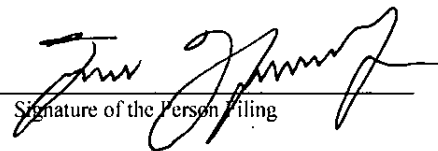
- ① NAME AND ADDRESS OF CLAIMANT
 - ② JUSTIFICATION FOR CLAIM
-
-
-

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

8559 ASTRONAUT BLVD
COKE CANOVERAL, FL 32920

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

BY TOM HERMANSON
Printed Name of the Person Filing
AS VICE PRESIDENT


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00