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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPORATION SERVICE COMPANY

Account Number Phone

Fax Number

: 120000000195 : (850)521-1000 : (850)558-1515

## DISSOLUTION OR WITHDRAWAL DESTINATION DAYTONA HOTEL, INC.

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$35.00 |

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## 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:   |   |
|---------|--|---|
|         | Destination Daytona Hotel, inc.  |   |
| SECOND: | The document number of the corporation (if known): P07000004497  |   |
| THIRD:  | The date dissolution was authorized: November 22, 2010   |   |
|         | 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 of 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: | n |
|         | The number of votes cast for dissolution was sufficient for approval by  |   |
|         | (voting group)   | C |
| :       | 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)               |   |
|         | Dona Tanaka  |   |
|         | (Typed or printed name of person signing)  |   |
|         | Secretary  |   |
|         | (Title of person signing)  |   |

Filing Fee: \$35