## PD 7000086505

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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TALL SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Dissolution of Corp	poration	
<b>DOCUMENT NUMBER:</b>		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Geoff Gackle (Name of Contact Person)		
(Name of Contact Person)		
Route 7 Publishing, Co-		
9900 N Kendall Dr #K102.		
(Address)		
Miami, FL 33176 (City/State and Zip Code)		
(City/State	and Zip Code)	
For further information concerning this matter, please call:		
Geoff Gackle	at (305) 494-0554	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
	\$43.75 Filing Fee & \$\begin{array}{l} \$52.50 Filing Fee, \\ Certified Copy & Certificate of Status & \\ Additional copy is \\ enclosed \end{array} & (Additional copy is \\ enclosed)	
MAILING ADDRESS:	STREET ADDRESS:	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the form of dissolution: The name of the corporation as currently filed with the Florida Department of FIRST: Route 7 Publishing Co The document number of the corporation (if known): PO 7000086505 SECOND: The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: 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 of 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)

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: Route 7 Publishing Co 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: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 9900 N Kendall Dr. #K102 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.