AGE 101/02 06/11/20 IVISION OT COTPO Florida Department of State **Division of Corporations Electronic Filing Cover Sheet** Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document. (((H10000134495 3))) H100001344953ABC. Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet. To: Division of Corporations Fax Number : (850)617-6380 From: : LAZARUS CORPORATE FILING SERVICE, Account Name INC. Account Number : 120000000019 Phone : (305)552-5973 : (305)220-1440 Fax Number DISSOLUTION OR WITHDRAWAL DISCOVER YOUR WORLD TRAVEL AND REPS INC Certificate of Status Û Certified Copy 0 Page Count 02 Estimated Charge \$35.00 2810 JUN 51 **Electronic Filing Menu** Corporate Filing Menu Help SUN 1 1 2010

فسلنت

4

LAZARUS

-

H 1 0 0 0 0 1 3 4 4 9 5 ARTICLES OF DISSOLUTION

~`~

Pursuant to section 607.140., 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 DISCOVER YOUR WORLD TRAVEL AND REPS INC | of State: | 1 | |
|---------|---|---|-------------|------------|
| SECOND: | The document number of the corporation (if known): | | | |
| THIRD: | The date dissolution was authorized: <u>6/8/10</u> | | | • |
| | Effective date of dissolution if applicable: | m file data) |) | • |
| 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 number of votes cast for dissolution was sufficient for approval by | CRETAT | |
| | (voling group) | Ten S | PM 1 | |
| | A | CONTRACT | : : : | • 1 |
| | 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 fiduciaty, by that fiduciary) | | | |
| | SILVIO PAEZ | | | |
| | (Typed or printed name of person signing) | | | |
| | PRESIDENT | | | |
| | (Title of person signing) | | | |
| | Filing Fee: \$35 | | | |

H10000134495