P10000017140

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ac | ldress) | |
| (Ac | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Na | Itie) |
| (Do | cument Number) | |
| Certified Copies | _ Certificate: | s of Status |
| Special Instructions to | Filing Officer: | |
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| | | |

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Valdis News 3-29-11

PROFESSIONAL ACCOUNTING SOLUTIONS, INC.

ACCOUNTING & TAX SERVICES

1825 MAIN STREET WESTON, FL 33326

TELEPHONE: 954-840-3474

March 9th, 2011

Amendment Section Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: A&S Immigration and Travel Services, Inc.

Dear Sir/Madam:

Enclosed herewith is one (1) original of the Articles of Dissolution for A&S Immigration and Travel Services, Inc., for filing in the records of the State of Florida. Additionally, you will find enclose a check in the amount of \$35.00 for the filing fee.

Please remit any correspondence to the name and address as noted on the cover letter.

Thank you for your prompt attention to and cooperation in this matter. Should you have any questions or need further information, please do not hesitate to contact us at the numbers listed above.

Very truly yours,

Mirtha M Casimiro

MMC/ss Enclosures

COVER LETTER

| Division of Corporations |
|---------------------------------------------------------------------------|
| SUBJECT: A&S IMMIGRATION AND TRAVEL SERVICES, INC. |
| DOCUMENT NUMBER: P10000017140 |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| SAYLI RODRIGUEZ (Name of Contact Person) (Firm/Company) |
| 11574 SW 91 TERR |
| (Address) |
| MIAMI, FL 33176 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| MIRTHA M CASIMIRO at (954) 822-6400 |

✓\$35 Filing Fee \$\sum \$\\$43.75 Filing Fee & \$\sum \$\\$43.75 Filing Fee & \$\sum \$\\$52.50 Filing Fee,

Certified Copy

enclosed)

(Additional copy is

MAILING ADDRESS:

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

(Name of Contact Person)

Enclosed is a check for the following amount:

Certificate of Status

STREET ADDRESS:

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

(Area Code & Daytime Telephone Number)

Certificate of Status &

Certified Copy

(Additional copy is enclosed)

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: | | |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| i mor. | A&S IMMIGRATION AND TRAVEL SERVICES, INC. | | |
| | AND IMMUNICIATION AND TRAVEL SERVICES, INC. | | |
| SECOND: | The document number of the corporation (if known): P10000017140 | | |
| THIRD: | The date dissolution was authorized: 03/01/2011 | | |
| | Effective date of dissolution if applicable: 03/01/2011 (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 | | |
| | SAYLI RODRIGUEZ (voting group) | | |
| | (voting group) | | |
| | Signature: | | |
| | (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if it the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) | | |
| | SAYLI RODRIGUEZ | | |
| | (Typed or printed name of person signing) | | |
| | PRESIDENT | | |
| | (Title of person signing) | | |

Filing Fee: \$35