

P1104439323

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

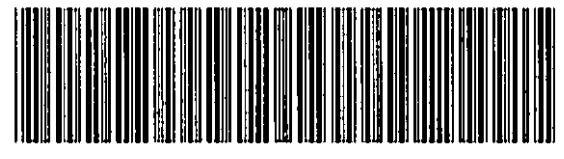
(Business Entity Name)

(Document Number)

Certified Copies ☒ Certificates of Status ☒

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Office Use Only



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MAR 19 2018

FILED
MAR 16 PM 1:22

V/Dwl
notice

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VOLUNTARY DISSOLUTION OF CORPORATION _____

DOCUMENT NUMBER: ST38264 _____

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

Please return all correspondence concerning this matter to the following:

EDWIN J. LOPEZ

(Name of Contact Person)

SILVER CIRCLE YTAVEL SERVICES, INC.

(Firm/Company)

14286 BEACH BLVD STE 19-378

(Address)

JACKSONVILLE, FLORIDA 32250-1568

(City/State and Zip Code)

For further information concerning this matter, please call:

EDWIN J. LOPEZ

(Name of Contact Person)

at (850-624-5975

(Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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:
SILVER CIRCLE TRAVEL SERVICES, INC.

SECOND: The document number of the corporation (if known): ^{ST38264} P11080059323

THIRD: The date dissolution was authorized: 9 MARCH 2018
Effective date of dissolution if applicable: 28 APRIL 2018
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

NANCY LOPEZ/EDWIN J. LOPEZ

(voting group)

Signature: Edwin J. Lopez

(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)

EDWIN J. LOPEZ

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)

FILED
19 MAR 15 PM 1:22
CLERK OF CIRCUIT COURT
JACKSONVILLE, FLORIDA

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: SILVER CIRCLE TRAVEL SERVICES, INC.

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:

NO CLAIMS ARE PENDING. ANY CLAIM PRESENTLY UNKNOWN MUST INCLUDE A LETTER DESCRIBING
THE DETAILS OF THE CLAIM AS WELL AS ANY RECEIPTS SHOWING THE AMOUNT OF ANY MONETARY
CLAIM OR LOSS.

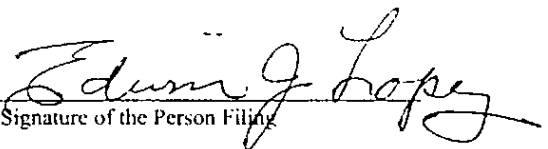
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

EDWIN J. LOPEZ, 14286 BEACH BLVD #19-378, JACKSONVILLE, FL 32250

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.

EDWIN J. LOPEZ

Printed Name of the Person Filing


Signature of the Person Filing

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