P9500051286

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
,		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Special instructions to Filling Officer.		

Office Use Only



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diss with

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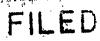
POR 10/8/10

COVER LETTER

Division of Corporations		
SUBJECT: DISSOLUTION	of Copponation	
DOCUMENT NUMBER: P 950000 5/286		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Cavidad R (Name of Conta	amos	
Advance Truck Trail (Firm/Con		
PoBox821836 - 2485 Address	VW 143 St, Opahocka, FL 33054	
Pendroke Pines, FL 3 (City/State and	30 & Q Zip Code)	
For further information concerning this matter, p	ease call:	
Caridad Ramos (Name of Contact Person)	at (786) 360 – 2605 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status Certificate Certificate Of Status Certificate Of Of Status Certificate Of Of Status Certificate Of	3.75 Filing Fee & S52.50 Filing Fee, rtified Copy Certificate of Status & ditional copy is closed) (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 subm of dissolution: SECRETARY OF STATE TALLAHASSEE, FLORIDA The name of the corporation as currently filed with the Florida Department of State: FIRST: SECOND: The document number of the corporation (if known): THIRD: The date dissolution was authorized: _ 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 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) (Typed or printed name of person signing)

Filing Fee: \$35

(Title of person signing)

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.

Advance Thuck Trailer Service Corporation 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: claims. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 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. Printed Name of the Person Filing