## P95000083398

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SECRETARY OF STATE TALLAHASSEE FLORIDA

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## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations			
SUBJECT: NOTICE OF COM	CPORATE	1)1550647102	
DOCUMENT NUMBER: P95	00008.	3898	
The enclosed Articles of Dissolution and	fee are sub	mitted for filing.	
Please return all correspondence concerni	ng this matte	er to the following:	
James L Some o	OLL JUAN f Contact Pe	erson)	
		у)	<del></del> -
2635 : 04500 RD.	Address)	· · · · · · · · · · · · · · · · · · ·	<del></del>
2635 02500 Rp. (1) HAIDES CITY FL. (City/Si	ate and Zip	3844 Code)	
For further information concerning this m			
JAMES SULLIVAN  (Name of Contact Person)	at (_	863°) 471 - 4795 (Area Code & Daytime Telepl	none Number)
Enclosed is a check for the following amo	unt:		
\$35 Filing Fee \$\Bullet\$\$43.75 Filing Fee & Certificate of Status	Certifie	d Copy Certificate of onal copy is Certified Cop	Status &
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Amendment Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	er Circle

## 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:
	SULLIVAN TRUCKING COMPANY, INC.
SECOND:	The document number of the corporation (if known): P95000083898
THIRD:	The date dissolution was authorized: 3-31-06
	Effective date of dissolution if applicable: 3-31-06 (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 of 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)  SEE FLOR STATE OF STATE
	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)
	TAMES L SULLIVAW (Typed or printed name of person signing)
	PRESIDENT (Title of person signing)

Filing Fee: \$35