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SEGRETARY OF STATE ALLAHASSEE, FLORIDA

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T. Reberte MAR 0 6/2007/

COVER LETTER

TO: Amendment Section

| Division of Corporations | | |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--|
| SUBJECT: DISSOLUTION | OF HT PORTER INC | |
| DOCUMENT NUMBER: | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | |
| Please return all correspondence concerning | g this matter to the following: | |
| Susan | DORYEN Contact Person) | |
| (Name of Contact Person) | | |
| HT PORTER INC (Firm/Company) WESCHELLE 225 PALMETTO STATES AND (Address) | | |
| (Firm/Company) | | |
| FRANCISCO 225 PALMETTO STATES | | |
| TIP I DE POSITION (A | ddress) | |
| NOKOMIS, IEC 34275 (City/State and Zip Code) | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| SUSAN DURYBA (Name of Contact Person) | at (<u>407</u>) <u>463-9300</u> (Área Code & Daytime Telephone Number) | |
| | | |
| Enclosed is a check for the following amou | nt: | |
| \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is Certified Copy | |
| | enclosed) (Additional copy is enclosed) | |
| MAILING ADDRESS: | STREET ADDRESS: | |
| Amendment Section | Amendment Section | |
| Division of Corporations P.O. Box 6327 | Division of Corporations Clifton Building | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle | |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

| Pursuant to of dissoluti | section 607.1403, Florida Statutes, this Florida profit corporation subness the following article on: The name of the corporation as currently filed with the Florida Department of State: |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: |
| SECOND: | The document number of the corporation (if known): |
| THIRD: | The date dissolution was authorized: 12/31/06 |
| | Effective date of dissolution <u>if applicable:</u> (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 |
| | (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) |
| | SUSAN DURYFA (Typed or printed name of person signing) |
| | PRESIDENT (Title of person signing) |

Filing Fee: \$35