196000064247

(Re	equestor's Name)	
(Ac	ldress)	
		•
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		
1		
	5''' 0'''	
Special Instructions to	Filing Officer:	
		ŀ

Office Use Only



300096454303

04/12/07--01029--012 **35.00

07 APR 13 PH 12: 20 SECRETARY OF STATE FLORID.

Ø

Dear Florida Dept of State, Lodging Inc. effective Merch 01, 2007 Effective Immediatly thank you for your help. Wyom Justing FEIN# 59-3436369 Document # P96000064247 Wynn Fralix 1865 NW. 50th Are Oleechobre H 38972-2853

863 763 2612 863 634 9193 cell

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ARticles of Dissolution
DOCUMENT NUMBER: #P9600064247
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
WYNN'S FISH ing + Lodging INC DRA-WYNN (Firm/Company) Place
1865 North West 5 1th Auc
WYNN'S FISH ing + Lodging INC DRA-WYNN (Firm/Company) 1865 North West 514 Auc (Address) Okeechobie Florida 34972-8853
(City/State and Zip Code)
For further information concerning this matter, please call:
Wynt Fralix at (863) 765 - 26/2 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & \$\sumsymbol{1}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, 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:
	Wyn's Fishing a lodging, Inc.
SECOND:	The document number of the corporation (if known):
THIRD:	The date dissolution was authorized: $3/1/07$
	Effective date of dissolution if applicable: 3//07 5 5 5 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6
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)
	Lynn Frally
ļ	(Typed or printed name of person signing)
	President
	(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

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: State of State of Articles of Dissolution. State of Corporation: State of Dissolution.
Description of information that must be included in a claim:
Docided to Close business and Corporation Closed Corporation ON 3-1-07
•
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 1865 N.W. 50 th Ave OKeechobse Fl
34972
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 Signature of the Person Filing

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