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R. WHITE



A PROFESSIONAL ASSOCIATION

April 29, 2014

Amendment Section Division of Corporations Florida Secretary of State P.O. Box 6327 Tallahassee, FL 32314 Gateway Center 1000 Legion Place • Suite 1200 Orlando, FL 32801

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\*BOARD CERTIFIED BY THE FLORIDA BAR IN BUSINESS LITIGATION

TALSO ADMITTED IN NEW YORK

\*\*OF COUNSEL

Re: Florida Bureau of Travel, Inc. - Document No. P97000036995

**Articles of Dissolution** 

Dear Sir or Madam:

Enclosed for filing is the original of the Articles of Dissolution for Florida Bureau of Travel, Inc., a Florida Corporation and Notice of Corporate Dissolution. Also enclosed is a check in the amount of \$35.00 for the filing fee.

If you have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

Richard D. Baxter, Esq.

rbaxter@southmilhausen.com

RDB/kaf

**Enclosures** 

## ARTICLES OF DISSOLUTION OF FLORIDA BUREAU OF TRAVEL, INC.

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 is:

## FLORIDA BUREAU OF TRAVEL, INC.

SECOND:

The document number of the corporation is: P97000036995

THIRD:

The date dissolution was authorized is March 15, 2014.

FOURTH:

Adoption of Dissolution:

Dissolution was approved by shareholders. The number of votes cast for

dissolution was sufficient for approval.

Signature:

ffrey Unnerstall, President

## FLORIDA BUREAU OF TRAVEL, INC. 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 Section 607.1407, F.S.

Name of Corporation:

## FLORIDA BUREAU OF TRAVEL, INC.

<u>Date of dissolution</u> 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:

The amount of the claim, the date or dates on which the claim arose, a description of the basis of the claim, a statement as to whether the claim as accrued or is contingent; if a claim for goods or services, a copy of the invoice or invoices should be provided.

Mailing address where claims can be sent:

8681 W. Irlo Bronson Memorial Highway Suite 129 Kissimmee, FL 34747

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within four (4) years after the filing of this notice.

Jeffrey C. Unnerstall
Printed Name of the Person Filing

Dated: March 14, 2014

Signature of Person Filing