(Requestor's Name)  (Address)  (Address)	500095468425
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL	04/03/0701036008 <b>**</b> 43.7S
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	OT APR -3 AM 10: 56 SECRE VARY OF STATE TALLAHASSEE, FLORIDA
Office Use Only	

## **COVER LETTER**

TO: Amendment Section

Division of Corporations	
SUBJECT: - Nactive - Voluntary Diss.	
DOCUMENT NUMBER: 798000088344	
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)	
American Airport Support + Tire-Rescue	
8539 NW 56street	
(Address)	
Doval, FL 33/66 (City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Contact Person) at (305) 640-0426 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$\text{\$\sum_\$\\$43.75 Filing Fee & \$\text{\$\sum_\$\\$43.75 Filing Fee & \$\text{\$\sum_\$\\$52.50 Filing Fee,} } \text{Certificate of Status & Certified Copy (Additional copy is enclosed)} \text{Certified Copy (Additional copy is enclosed)}	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

OT APR -3 AM ID: C

Pursuant to section 607.1401, 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: The document number of the corporation (if known): 798000088344 SECOND: The file date of the articles of incorporation: THIRD: FOURTH: (CHECK AT LEAST ONE BOX) None of the corporation's shares have been issued. The corporation has not commenced business. FIFTH: No debt of the corporation remains unpaid. SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued. SEVENTH: Adoption of Dissolution (CHECK ONE) A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution. 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.)

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: American Arrivort Support & five Rescue  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:
voluntary Dissolution
·
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.
Ciai Acetro
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