Division of Corporations Electronic Filing Cover Sheet

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To:

o:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

DISSOLUTION OR WITHDRAWAL **BROOKS HOSPITALITY CORPORATION**

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$43.75

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ARTICLES OF DISSOLUTION

407 244.5690

Pursuant to s articles of di	section 607.1403, Florida Statutes, this Florida profit corporation submits the following ssolution:	
FIRST:	The name of the corporation as currently filed with the Florida Department of State:	
	BROOKS HOSPITALITY CORPORATION	
SECOND:	The document number of the corporation (if known): <u>P98000089626</u>	
THIRD:	The date dissolution was authorized: DECEMBER 12, 2023	
	Effective date of dissolution if applicable: December 31, 2023 (no more than 90 days after dissolution file date) Adoption of Dissolution (CHECK ONE)	
FOURTH:	Adoption of Dissolution (CHECK ONE)	
	☑ Dissolution was approved by the shareholders. The number of votes east for dissolution was sufficient for approvai	
	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	
	N/A (voting group)	
Signed this 2	J	
Signature: _	(M. Brook)	
	(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)	
	Cynthia M. Brooks (Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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