

P98000099922

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

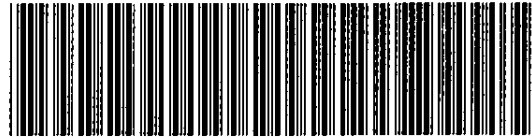
Certified Copies



Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



100199809441

04/01/11--01012--024 \*\*43.75

FILED  
2011 APR -1 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Diss.

TR 4-4-11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Fly System, Inc.

**DOCUMENT NUMBER:** P98000099922

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Magbis Riley  
(Name of Contact Person)

Fly System, Inc.  
(Firm/Company)

11481 SW Rossano Lane  
(Address)

Port St. Lucie, FL 34987  
(City/State and Zip Code)

For further information concerning this matter, please call:

Magbis Riley at (561) 350-5411  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☒ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, 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:

Fly System, Inc.

SECOND: The document number of the corporation (if known): P98000099922

THIRD: The date dissolution was authorized: 3/21/2011

Effective date of dissolution if applicable: 3/21/2011  
(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)

Maghis Riley  
(Typed or printed name of person signing)

President  
(Title of person signing)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 APR - 1 PM 12:23

FILED

Filing Fee: \$35