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(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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COVER LETTER

Division of Corporations SUBJECT: Articles of Dissolution - Central Florida Sheltered Workshop DOCUMENT NUMBER: 704516 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: M. Katie Porta (Name of Contact Person) Quest, Inc. (Firm/Company) PO Box 531125 (Address) Orlando, FL 32853 (City/State and Zip Code) For further information concerning this matter, please call: Catherine Rogerson (Name of Contact Person) Enclosed is a check for the following amount: □\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & ▼\$52.50 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)

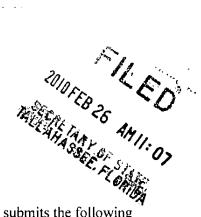
MAILING ADDRESS:

TO: Amendment Section

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 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:		
	Central Florida Sheltered Workshop JMC		
SECOND:	The document number of the corporation (if known): 704516		
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)		
	SECTION I If the corporation has members entitled to vote:		
	(CHECK/COMPLETE ONE)		
	The date of the meeting of members at which the resolution to dissolve was adopted		
	2/18/2010 . The number of votes cast by the		
	members was sufficient for approval.		
	The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.		
	SECTION II If the corporation has no members or members entitled to vote on the dissolution:		
	The corporation has no members or members entitled to vote on the dissolution.		
	The date of adoption of the resolution by the board of directors was		
	The number of directors in office was and the vote for resolution was		
	for and against. (must be a majority vote)		

FOURTH: Effective date of dissolution <u>if applicable</u>: 2/18/2010

(no more than 90 days after dissolution file date)

Signature MKC

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

M. Katie Porta

(Typed or printed name of the person signing)

President

(Title of person signing)

FILING FEE: \$35