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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

DISSOLUTION OR WITHDRAWAL CHILDCRAFT EDUCATION CORP.

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COVER LETTER

TO:	Amendment Section Division of Corporations			
SUBJ	CHILDCRAFT EDUCATION COR	P.		
3000	EC1.	(Name of Corpo	ration)	
DOC	UMENT NUMBER: 835035			
The en	nclosed withdrawal application and	fee are submitted	for filing.	
	e return all correspondence concerning r to the following:	; this		
	NATHANIEL FIEWEGER			
		(Name of Perso	n)	
	SCHOOL SPECIALTY, INC.			
(Firm/Company)				
W6316 DESIGN DRIVE				
(Address)				
	GREENVILLE, WI 54942			
	(C	City/State and Zip	code)	
For fu	orther information concerning this mat	ter, please call:		
NATH	ianiel fieweger	920 at (243-5493	
Enclo	(Name of Person) sed is a check for the amount:	(Are	a Code & Daytime Telephone Number)	
\$3,	5 Filing Fee \$\int \\$43.75 Filing Fee & [Certificate of Status	\$43.75 Filing Centified Copy (Additional co Enclosed)	Certificate of Status & Certified	
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallabassee, FL 32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahasser, FL, 32301	

CHILDCRAFT EDUCATION CORP.



APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

(Name of Corporation)

835035			
(Document Number of Corporation (if known)			
NEW YORK			
(Incorporated Under	Laws of)		
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders.			
This corporation revokes the authority of its registered agrappoints the Department of State as its agent for service of the time it was authorized to transact business or conduct affi	process based on a cause of action arising during		
The following is a current mailing address for the corporatio	a;		
W6316 DESIGN DRIVE			
(Mailing Address)			
GREENVILLE, Wi 54942			
(City/ State /Z	p)		
The corporation agrees to notify the Department of State in to (Signature of Afrence, president or other officer - if in the hands of a receiver or other count appointed fiduciary, by that fiduciary)	Grahy		
KEVIN BAEHLER	VP/FREASURER		
(Typed or printed name of person signing)	(Title of person signing)		
filing fee	\$35		