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From:

Account Name : C T CORPORATION SYSTEM

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(850) 205-8842 (850) 878-5368

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DISSOLUTION OR WITHDRAWAL DH COOPERATIVE, INC.

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COVER LETTER

10:	Amendment Section Division of Corporations		
SUBJ	ECT: DH Cooperative, Inc.		
		(Name of Corporatio	n)
DOC	UMENT NUMBER: <u>F00000004789</u>		
The e	nclosed withdrawal application and	l fee are submitted for f	iling.
	e return all correspondence concerning to the following:	g this	
	Michael Orvets		
		(Name of Person)	
	DH Cooperative, Inc.		
		(Firm/Company)	
	2200 Pennsylvania Avenue, NW		
		(Address)	
	Washington, DC 20037		
	(City/State and Zip code	(6)
For fu	arther information concerning this ma	•	
Micha	el Orvets	at ()	419-7678
Enclo	(Name of Person) used is a check for the amount:	(Area Co	de & Daytime Telephone Number)
∑ \$3	5 Filing Fee \$\int \$43.75 Filing Fee & Certificate of Status		Certificate of Status & Certified
	MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL.32314		STREET ADDRESS: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL. 32301

	TO The
DH Cooperative, Inc.	
(Name of Corporation	on)
F00000004789	10 m
(Document Number of Corporat	ion (if known)
. .	
Delaware (Incorporated Under La	
(incorporated onder La	ws or)
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Mayfield Heights, OH 44124 (City/ State /Zip) rporation agrees to notify the Department of State in the	ocess based on a cause of action arising s in Florida.
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FILING FEE \$35