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March 6, 2000

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Florida Department of State
Corporations Division
Post Office Box 6327
Tallahassee, FL 32314

FILED
00 MAR -9 PM 2:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Articles of Dissolution - Florida Aggregates Intergroup, Inc.

Dear Sir or Madam:

In order to dissolve the above-referenced corporation, we have enclosed the following documents:

1. One (1) original and one (1) copy of the Articles of Dissolution of Florida Aggregates Intergroup, Inc.; and
2. Our firm's check in the amount of \$35.00 representing the fee associated with this service.

Please have a copy of the filed Articles of Dissolution returned to the undersigned in the self-addressed, stamped envelope which is also enclosed. Your prompt attention to this matter would be greatly appreciated.

Sincerely,



Charles H. Stark

CHS/db
Enclosures

Uo/d's

V. SHEPARD MAR 21 2000

ARTICLES OF DISSOLUTION
OF
FLORIDA AGGREGATES INTERGROUP, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of the Corporation is FLORIDA AGGREGATES INTERGROUP, INC.
2. Dissolution of the Corporation was authorized as of the close of business on December 31, 1999 to be effective upon the filing of these Articles of Dissolution with the Florida Secretary of State.
3. Dissolution was approved by unanimous vote of all shareholders and directors of the Corporation pursuant to a Written Consent made pursuant to Section 607.1402 of the Florida Statutes, which was sufficient for its approval.

DATED this 27th day of January, 2000.

FLORIDA AGGREGATES INTERGROUP, INC.

By: Phylis P. Caruso
Phylis P. Caruso, President

STATE OF FLORIDA

COUNTY OF Orange

The foregoing instrument was acknowledged before me this 27th day of January, 2000, by Phylis P. Caruso, President of FLORIDA AGGREGATES INTERGROUP, INC., a Florida corporation, on behalf of the corporation. Said person did not take an oath and (check one) is personally known to me or produced a valid driver's license as identification.

Natalie Teresa Lewis-Ross
Print Name: _____
Notary Public - State of Florida
Commission Number: _____
My Commission Expires: _____

