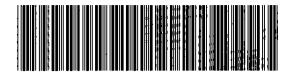
## L10000027203

(Reques	tor's Name)	
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SECRETARY OF STATE

### COVER LETTER

SUBJECT: CJM-WORKS (CC	
(Name of Limited Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Charles Lavender (Name of Person)	
(Name of Person)	
C5M-WORKS LCC	
(Firm/Company)	
348 NW Delar Glen (Address)	
(Address)	
LAKECITY F1. 32055	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
(Name of Person) at (904) 386 6142  (Area Code & Daytime Telephone Number)	ı
Enclosed is a check for the following amount:	
\$25.00 Filing Fee & Sociate of Status Securificate of Status Certified Copy (additional copy is enclosed)  Securificate of Status & Certified Copy (additional copy is enclosed)	scd)

#### MAILING ADDRESS:

Registration Section

Division of Corporations

TO:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



June 2, 2011

CHARLES R. LAVENDER 348 NW DELAR GLEN LAKE CITY, FL 32055

SUBJECT: CJM-WORKS, LLC Ref. Number: L10000027203

We have received your document for CJM-WORKS, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 311A00013498

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

# DIVISION OF CORFORATIONS

#### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is 1-WOCKS 2. The Articles of Organization were filed on and assigned document number 6/20/11 3. The date the dissolution was approved: 4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). Business 5. CHECK ONE: All debts, obligations and liabilities of the limited liability company have been paid or discharged. -OR-Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421. 6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests. 7. CHECK ONE: There are no suits pending against the company in any court. Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit. Signatures of the members having the same percentage of membership interests necessary to approve the dissolution: Signature Printed Name