

PO1000100048

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

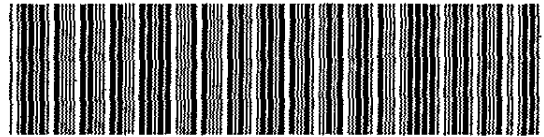
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*Voldis  
T. Lewis*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

04 MAY 17 AM 11:30

FILED

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Corporation

**DOCUMENT NUMBER:** PO1000100048

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles M. Celebrezze  
(Name of Person)

CMC Group Holdings, Inc.  
(Name of Firm/Company)

PO Box 771731  
(Address)

Lakewood, OH 44107  
(City/State/and Zip Code)

For further information concerning this matter, please call:

Charles M. Celebrezze at (216) 280-1359  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

**MAILING ADDRESS:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Department of State:

CMC Group Holdings, Inc.

SECOND: The document number of the corporation (if known): P01000100048

THIRD: The date dissolution was authorized: 4/30/04

Effective date of dissolution if applicable: 4/30/04

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by of the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signed this \_\_\_\_\_ day of \_\_\_\_\_

Signature: Charles M. Celebrezze

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

Charles M. Celebrezze

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

FILED  
MAY 17 AM 11:30  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA