P050000099817

| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phone | ÷#) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to I | Filing Officer: | |
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SECRETARY OF STATE

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COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: TCED, INC |
| DOCUMENT NUMBER: P05000029817 |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| TIMOTHY HONAKER |
| (Name of Contact Person) |
| TCED, INC |
| (Firm/Company) |
| 401 QUAIL DRIVE |
| (Address) |
| DEBARY, FL 32713 |
| (City/State and Zip Code) |
| For further information concerning this matter, please call: |
| TIMOTHY HONAKERat (_407) _574-8796 |
| (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| \$35 Filing Fee \$\sum \\$43.75 Filing Fee & \$\sum \\$43.75 Filing Fee & \$\sum \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle |

Tallahassee, FL 32301

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 Florida Department of State: | | | |
|---------|---|--|--|--|
| | TCED, INC | | | |
| SECOND: | The document number of the corporation (if known): P05000029817 | | | |
| THIRD: | The date dissolution was authorized: APRIL 15, 2007 | | | |
| | Effective date of dissolution if applicable: DECEMBER 31, 2006 (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 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) | | | |
| | -TAS 0: | | | |
| | Signature: (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) | | | |
| | TIMOTHY HONAKER | | | |
| | (Typed or printed name of person signing) | | | |
| | PRESIDENT | | | |
| | (Title of person signing) | | | |