P05000057143

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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SECRETARY OF STATE OIVISION OF CORPORATIONS

02/08/06--01036--003 **140.00

MMh. Diss. W/Notice 02/14/06

COVER LETTER

TO: Amendment Section

Division of Corporations				
SUBJECT: Community Capital Mortgage Services, Inc.				
DOCUMENT NUMBER: P05000057143				
The enclosed Articles of Dissolution and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Caroline McKeon				
(Name of Contact Person)				
DreamWeb Office Consultants, Inc.				
(Firm/Company)				
11404 SunCreek Place				
(Address)				
Temple Terrace, FL 33617				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
Caroline McKeonat (_813)988-7772				
(Name of Contact Person) (Area Code & Daytime Telephone Number	r)			
Enclosed is a check for the following amount:				
▼\$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is enclosed) (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:			
	Community Capital Mortgage Services, Inc.				
SECOND:	The document number of the corporation (if known): P050000571	43			
THIRD:	IRD: The date dissolution was authorized: February 02				
	Effective date of dissolution <u>if applicable:</u> February 02, 2 (no more than 90 days after dissolution				
FOURTH:	Adoption of Dissolution (CHECK ONE)				
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissol	lution		
	Dissolution was approved by of the shareholders through voting groups.	ı			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	E** 3		
	The number of votes cast for dissolution was sufficient for approval by	06 FT	SECRI)(VISION		
	Izaak D. Patten, owner of 100% of voting stock (voting group)	06 FEB -8 AM 10: 26	TARY OF STAIL OF CORPORATIONS		
;	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)		SNOT		
	Izaak D. Patten				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

against this corporation as provided in s. 607.1407, F.S.

Izaak D. Patten
Printed Name of the Person Filing

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: Community Capital Mortgage Services, Inc. Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Date of services performed Date of goods delivered Description of goods or services Amount due per goods or services Contact person who authorized purchase Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) DreamWeb Office Consultants, Inc. 11404 SunCreek Place Temple Terrace, FL 33617 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Signature of the Person Filing