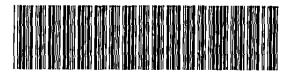
P050.0.0112816

| (Requestor's Name) | | | |
|---|-------------------|-----------|--|
| | | | |
| (Address) | | | |
| | | | |
| (Address) | | | |
| | | | |
| (City/State/Zip/Phone #) | | | |
| | | | |
| PICK-UP | MAIT | MAIL | |
| | | | |
| (Bu | siness Entity Nan | ne) | |
| | | | |
| (Do | cument Number) | | |
| | | | |
| Certified Copies | Certificates | of Status | |
| | | | |
| Second Instructions to 6 | Tiling Officer | | |
| Special Instructions to Filing Officer: | | | |
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08/22/05--01030--018 **43.75



COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|--|--|--|
| SUBJECT: Dissolution of Corpo | oration | |
| DOCUMENT NUMBER: P050001 | 12816 | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | |
| Please return all correspondence concerning | g this matter to the following: | |
| Joanna Nichols | | |
| (Name of Person) | | |
| TCMH Homes, Inc. | | |
| (Name of Firm/Company) | | |
| 210 NW Park ST. #203 | | |
| (Ac | ddress) | |
| Okeechobee, Fl 34972 | | |
| (City/State/and Zip Code) | | |
| For further information concerning this mat | ter, please call: | |
| Joanna Nichols | at (561) 654-9040 | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | |
| Enclosed is a check for the following amount | nt: | |
| \$35 Filing Fee \$\infty\$\$43.75 Filing Fee & [Certificate of Status | \$43.75 Filing Fee & \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | |
| MAILING ADDRESS: | STREET ADDRESS: | |
| Amendment Section Division of Corporations | Amendment Section Division of Corporations | |
| P.O. Box 6327 | 409 E. Gaines Street | |

Tallahassee, Florida 32399

Tallahassee, Florida 32314

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: | | | |
|---------|--|---|---|--|
| | TCMH Home | es, Inc. | | |
| SECOND: | The document numb | per of the corporation (if known | :P05000112816 | |
| THIRD: | | The date dissolution was authorized: August 20, 2005 | | |
| | Effective date of dis | solution <u>if applicable:</u> (no m | ore than 90 days after dissolution file date) | |
| FOURTH: | Adoption of Dissolu | tion (CHECK ONE) | | |
| | Dissolution was was sufficient for | | The number of votes cast for dissolution | |
| | Dissolution was | approved by of the shareholders | through voting groups. | |
| | | nent must be separately provided n the plan to dissolve: | d for each voting group entitled | |
| | The number of votes | cast for dissolution was sufficie | ent for approval by | |
| | | (voting group) | | |
| Ç | Signed this 19th | day of August | 2005 | |
| | ngiled tills | uay or | • | |
| S | | sident or other officer - if directors or officer in the hands of a receiver, trustee, or other | | |
| 1 | Joanna Nicho | ols | | |
| • | (Τ) | rped or printed name of person signing) | | |
| | President | | | |
| - | | (Title of person signing) | | |

Filing Fee: \$35