P05000158985

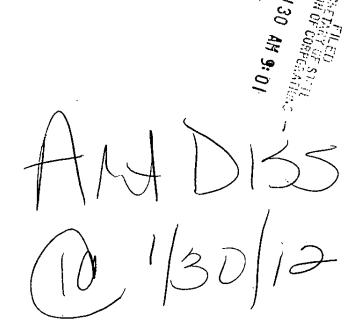
(Re	equestor's Name)		
(Ac	idress)		
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(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



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01/13/12--01014--007 **35.00



TO: Amendment Section

Division of Corporations	
SUBJECT:	
DOCUMENT NUMBER: P650	000158985
The enclosed Articles of Dissolution and fee a	re submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
(Name of Con	tact Person)
CSB	ŕ
(Firm/Co	
MACEAU, F	7th LN 33013
(City/State ar	
For further information concerning this matter,	please call:
(Name of Contact Person)	at (754) 235 000 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status (A	S43.75 Filing Fee & Scrifficate of Status & Certified Copy is cholosed) Section 1
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 13, 2012

LANA VON FUNK
CBS SPECIALTIES INC.
4310 E. 9TH LN
HIALEAH, FL 33013

SUBJECT: CSB SPECIALTIES INC.

Ref. Number: P05000158985

We have received your document for CSB SPECIALTIES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE CHECK ONE OF THE BOXES IN THE 4TH(FOURTH) PART OF THE FORM.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 612A00000994

of Cornerations - P.O. ROX 6327 -Tallahassee, Florida 3231

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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	::			
i iito i .	CSB Soncial tres Ine	•			
SECOND:	The document number of the corporation (if known): 205000589	3	5		
THIRD:	The file date of the articles of incorporation: 12605				
FOURTH:	(CHECK AT LEAST ONE BOX)				
	None of the corporation's shares have been issued.	<u>.</u>	 ⊆ ≪ _{er.}		
	The corporation has not commenced business.		PER STATE		
FIFTH:	(10 act of the corporation remains ampaia.				
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.	: •	POWNICE FS: IL		
SEVENTH:	Adoption of Dissolution (CHECK ONE)		į,		
	A majority of the incorporators authorized the dissolution.				
A majority of the directors authorized the dissolution.					
Sign	ature:				
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	r - if			
	(Typed or printed name of person signing)				
	VP				
	(Title of Person Signing)				

Filing Fee: \$35