(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
	Office I Ise On	

11/18/18



800137834798

11/14/08--01021--010 **43.75

COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: Choice Education Group, Inc.			
DOCUMENT NUMBER: P06000137631			
The enclosed Articles of Dissolution and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Peter Sciandra (Name of Contact Person)			
(I value of Collision)			
(Firm/Company)			
235 Apollo Beach Blvd Suite 512 (Address)			
(Address)			
Apollo Beach FC 33572 (City/State and Zip Code)			
For further information concerning this matter, please call:			
Peder Sciandra at (716) 984-8784 (Name of Contact Person) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:			
\$\text{\$\frac{1}{2}\$\$ \$43.75 Filing Fee & \$\text{\$\frac{1}{2}\$\$ \$43.75 Filing Fee & \$\text{\$\frac{1}{2}\$\$ \$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (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	of State:	
	Choice Education Group, I	nc.	
SECOND:	The document number of the corporation (if known): Polomo 13	7631	
THIRD:	The date dissolution was authorized:		
	Effective date of dissolution if applicable: 111100 (no more than 90 days after dissolution	1 tile date)	
FOURTH:	Adoption of Dissolution (CHECK ONE)		
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	for dissolution	1
	Dissolution was approved by the shareholders through voting groups.		
	The following statement must be separately provided for each voting group of to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by	THE NOVILLE PH	
	(voting group)		in a second
			[and
		72:04	Spinster.
		2	
	(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)		
	Peter Sciandra (Typed or printed name of person signing)		
	President		
	(Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

.	Notice of Corporate Dissolution
	ted by the dissolved corporation named below for resolution of payment of unknown claims on as provided in s. 607.1407, F.S.
This "Notice of Corp.	orate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation	: Choice Education Group, Inc.
Date of dissolution w specified in the Artic	ill be the date the dissolution is filed with the Department of State or as les of Dissolution.
Description of inform	nation that must be included in a claim;
,	
Mailing address whe	re claims can be sent: (Claims cannot be sent to the Division of Corporations)
	Peter Sciandra
- 	235 Apollo Beech Bivd
	Apollo Beach, FC 33572
	bove named corporation will be barred unless a proceeding to enforce the claim is commenced the filing of this notice.
	· · · · · · · · · · · · · · · · · · ·
F	Peter Sciandra Fine
Pri	nted Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00