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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: CENTURY PAYMENT ADVISORS, INC. COMPLETED DISSOLUTION FORM
DOCUMENT NUMBER: P06000150045
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JAMES P. WEHRLE, CPA
(Name of Contact Person)
FLAHERTY SALMIN CPAS
(Firm/Company)
2300 BUFFALO ROAD, BUILDING 200
(Address)
ROCHESTER, NY 14624-1365
(City/State and Zip Code)
For further information concerning this matter, please call:
JAMES P. WEHRLE, CPA at ((585) 397-1324
(Name of Contact Person) (Area Code) (Daytime Telephone Numb
Enclosed is a check for the following amount:
■\$35 Filing Fee
Mailing Address: Street Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FIRST: The name of the corporation as currently filed with the Florida Department of State: CENTURY PAYMENT ADVISORS, INC. SECOND: The document number of the corporation (if known): The date dissolution was authorized: THIRD: Effective date of dissolution if applicable: (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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) 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) ROBERT WECHSLER (Typed or printed name of person signing) **PRESIDENT** (Title of person signing)

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles

of dissolution:

Filing Fee: \$35