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TO: Amendment Section Division of Corporations		
SUBJECT: DISSOLUTION OF CORPORATION		
DOCUMENT NUMBER: <u>P/00000/357</u>		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
THOMAS E. BONN/ANDER (Name of Contact Person)		
TJC FINANCIA! GROUP INC		
(Firm/Company)		
6254 BRANCHWOOD DR.		
LAKE WORTH, FL 33467		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
THOMAS E. BONN ANDER (561) 308-7844		
(Name of Contact Person) (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:		
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)		
MAILING ADDRESS: Amendment Section Division of Corporations STREET ADDRESS: Amendment Section Division of Corporations		

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301