P11000013145

| (Rec | questor's Name) | | |
|---------------------------|------------------|-------------|--|
| (Add | lress) | | |
| (Ado | dress) | | |
| (City | /State/Zip/Phon | e #) | |
| PICK-UP | WAIT | MAIL | |
| (Bus | siness Entity Na | me) | |
| (Doc | cument Number |) | |
| Certified Copies | Certificate | s of Status | |
| Special Instructions to F | Filing Officer: | | |
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| . Office Use Only | | | |



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ORIY 9/25/14

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|---|---|--|--|--|
| Division of Corporations | | | | |
| SUBJECT: <u>Sale of C</u> | ES-DUFFIELD, ZNG | | | |
| DOCUMENT NUMBER: P11000013145 | | | | |
| The enclosed Articles of Dissolution and fee a | re submitted for filing. | | | |
| Please return all correspondence concerning th | is matter to the following: | | | |
| Maurice Ditr (Name of Cor | ra pani ntact Person) | | | |
| Commercial ENE | ompany) Specialists INC | | | |
| 952 Jupiter Pa | RK Lane-Suite 1 | | | |
| Jupiter FLOR (City/State a | ida 33458 nd Zip Code) | | | |
| For further information concerning this matter, | please call: | | | |
| Maurice Ditrapanii (Name of Contact Person) | at (561) 354.2706 (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | | | |
| Certificate of Status (| \$43.75 Filing Fee & \$\simeg\$ \$52.50 Filing Fee, Certified Copy Additional copy is enclosed) \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) | | | |
| 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

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: | | | | |
|---------|---|------------------|---------------------------|--|--|
| | CES-DUFFIELD, INC | | | | |
| SECOND: | The document number of the corporation (if known): P11000013145 | | | | |
| THIRD: | The date dissolution was authorized: 3/31/2014 | | | | |
| | Effective date of dissolution if applicable: MARCH 31. (no more than 90 days after dissolution to | 30 file date) | 14 | | |
| FOURTH: | Adoption of Dissolution (CHECK ONE) | | | | |
| | Dissolution was approved by the shareholders. The number of votes east f was sufficient for approval. | or diss | solution | | |
| | ☐ Dissolution was approved by the shareholders through voting groups. | | | | |
| | The following statement must be separately provided for each voting group ento vote separately on the plan to dissolve: | ıtitled | | | |
| | The number of votes cast for dissolution was sufficient for approval by | 14 SEP | ENTERNA E · E E · E | | |
| | Signature: (By a director/president or other officer - if directors or officers have not been selected, by | 19 PM 3:51 | | | |
| | an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) | | | | |
| | (Typed or printed name of person signing) | | | | |
| | (.)t t | | | | |
| | TREASURER (THE | | | | |
| | (Title of person signing) | | | | |

Filing Fee: \$35