P9800036220

| (Requestor's Name) | | | |
|---|--|--|--|
| | | | |
| (Address) | | | |
| | | | |
| (Address) | | | |
| | | | |
| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
| | | | |
| (Business Entity Name) | | | |
| | | | |
| (Document Number) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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Office Use Only



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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

| TO: Amendment Section Division of Corporations |
|---|
| SUBJECT: Chamberlin Trucking Incorporated |
| DOCUMENT NUMBER: P98600036220 |
| The enclosed Articles of Dissolution and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Karen A. Chamberlin (Name of Contact Person) Chamberlin Trucking Inc. (Firm/Company) |
| (Name of Contact Person) |
| Chamberlin Trucking Inc. |
| (Firm/Company) |
| 17 Gorsline Sweet |
| 77 Gorsline Street (Address) Rochester New York 14613 |
| (City/\$tate and Zip Code) |
| For further information concerning this matter, please call: |
| Haven Chamberlin at (585) 820-9027 (Name of Contact Person) (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: |
| _ |
| S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy is enclosed) (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 CircleTallahassee, 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 | f State: | |
|---------|---|--------------------------------------|--|
| | Chamberlin Trucking, Incorporated | 7 | |
| SECOND: | The document number of the corporation (if known): P980003622 | <u>.</u> | |
| THIRD: | The date dissolution was authorized:120105 | | |
| | Effective date of dissolution if applicable: 12/31/05 | | |
| | (no more than 90 days after dissolution | file date) | |
| 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 of the shareholders through voting groups. | | |
| | The following statement must be separately provided for each voting group e to vote separately on the plan to dissolve: | ntitled Esp. 8 | |
| | The number of votes cast for dissolution was sufficient for approval by | FILEU JAN 13 CRETARY LAHASS | |
| | (voting group) | - FO 3 | |
| | | STATE LORID | |
| | Signature: Kawa. Chamberlin | > | |
| | (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) | | |
| | Karen A. Chamberlin | | |
| | (Typed or printed name of person signing) | | |
| | Secretary / Ireasurer | | |
| | (Title of person signing) | | |

Filing Fee: \$35