## P99000047116

| (Re                       | questor's Name)   |             |
|---------------------------|-------------------|-------------|
| (Ad                       | dress)            |             |
| (Ad                       | dress)            |             |
| (Cit                      | y/State/Zip/Phon  | e#)         |
| PICK-UP                   | ☐ WAIT            | MAIL        |
| (Bu                       | siness Entity Nai | me)         |
| (Do                       | cument Number)    |             |
| Certified Coples          | Certificates      | s of Status |
| Special Instructions to I | Filing Officer:   |             |
|                           |                   |             |
|                           |                   |             |
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Office Use Only



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SECRETAL SECTION 50

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## TRANSMITTAL LETTER

**TO:** Amendment Section

Tallahassee, Florida 32314

| Division of Corporations  |
|---|
| SUBJECT: JISSOLUTION OF S CORPORATIO  |
| DOCUMENT NUMBER:  |
| The enclosed Articles of Dissolution and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| FRED E. FELS  |
| (Name of Person)  |
| (Name of Firm/Company)  |
| (Name of Firm/Company)  1406 S. OREGON CIRCLE  (Address)  TAMPA FL., 33612-6565   |
| (Address)   |
| TAMPA FL. 33612-6565  |
| (City/State/and Zip Code)   |
| For further information concerning this matter, please call:  |
| TRED E, FELS at (8/3) 936-2129 (Name of Person) (Area Code & Daytime Telephone Number   |
| Enclosed is a check for the following amount:   |
| Status Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & \$352.50 Filing Fee, Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines Street                |

Tallahassee, Florida 32399

## ARTICLES OF DISSOLUTION

| Pursuant to articles of di | section 607.1403, Florida Statutes, this Florida profit corporation submits the following ssolution:  |
|----------------------------|---|
| FIRST:                     | The name of the corporation as currently filed with the Department of State Week.   |
| SECOND:                    | The document number of the corporation (if known): 19900047116  |
| THIRD:                     | The date dissolution was authorized: MATCh 29, 2004   |
|                            | Effective date of dissolution if applicable: APRIL 1, 2004, 2 (no more than 90 days after dissolution the 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 entitled to vote separately on the plan to dissolve:  |
|                            | The number of votes cast for dissolution was sufficient for app. avail by   |
|                            | 100%  |
|                            | Signed this 29 day of MARCH 2004.   |
|                            | 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)  TRED E. FELS   |
|                            | (Typed or printed name of person signing)  PRESIDENT  (Title of person signing)   |

Filing Fee: \$35

## Notice of Corporate Dissolution

| This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S. |
|---|
| This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution  |
| Name of Corporation: PRC5 GROUP, WC.  |
| Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. 15 APCIL 2004                |
| Description of information that must be included in a claim:  |
| S CORPORATION TO BE DISSOLVED DUE   |
| TO INCAPACITY OF PRESIDENT TO ATTEND  |
| NORMAL FUNCTION OF THE CORPORATION  |
|   |
|   |
| Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  FRED FECS  1406 S. OREGOV CIR.                                       |
| TANPA, FC 33612-6565  |
| <u> </u>  |
| A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.        |
| FRED EIFELS Auditols  |
| Printed Name of the Person Filing Signature of the Person Filing  |

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