## P99000096122

Florida Department of State Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

February 1, 2000

Dear Sir or Madam:

Attached is the form concerning the dissolution of Tri-County Wholesale Corporation along with a check in the amount of \$43.75 for the filing fee and certified copy of this dissolution. My address and phone are:

Samantha L. Henson 373 Glenn Road West Palm Beach, Florida 33405 (561) 533-9090

Thank you.

200003135202--2 -02/15/00--01026--005 \*\*\*\*\*43.75 \*\*\*\*\*43.75

Sincerely,

Samantha L. Henson

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## ARTICLES OF DISSOLUTION

OOFEBILED

SECRETARY OF STATE

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

FIRST:	The name of the corporation is: TRI - COUNTY WHOLESALE
	CORPORATION
SECOND:	The date dissolution was authorized: 02 -01-00
THIRD:	Adoption of Dissolution (CHECK ONE)
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
Diss	solution was approved by vote of the shareholders through voting groups.
	the following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	(voting group)
Sig	med this 01 day of FEBRUARY, 2000.
Signature Smafffull Jenur	
	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	SAMANTHA UNDA HENSON (Typed or printed name)
	PSTD
	VINESIDENT, SECKETARY, TREASURER, DIRECTOR