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(Requestor's Name)

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

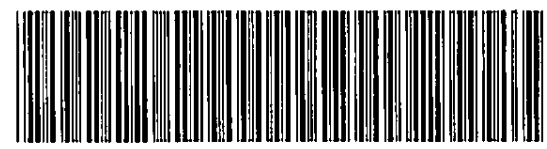
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2018 SEP 28 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FL

C. GOLDEN

OCT -2 2018

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution - Matlacha Mariners, Inc.

DOCUMENT NUMBER: N02000001241

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jerry Tolliver

(Name of Contact Person)

Matlacha Mariners, Inc.

(Firm/Company)

PO Box 21

(Address)

Matlacha, FL 33993

(City/State and Zip Code)

For further information concerning this matter, please call:

Jerry Tolliver

(Name of Contact Person)

at (239)

(Area Code)

464-0809

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status \$43.75 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2018

JERRY TOLLIVER **2ND MAILING**
4618 PINE ISLAND ROAD
#1B
MATLACHA, FL 33993

SUBJECT: MATLACHA MARINERS, INC.
Ref. Number: N02000001241

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can complete only one (1) box in SECTION I.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Clairetha Golden
Regulatory Specialist II

Letter Number: 518A00010985

RECEIVED
17 SEP 28 AM 11:22
SECRETARY OF
LABOR



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 25, 2018

JERRY TOLLIVER
POST OFFICE BOX 21
MATLACHA, FL 33993

SUBJECT: MATLACHA MARINERS, INC.
Ref. Number: N02000001241

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can complete only one (1) box in SECTION I.

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Claretha Golden
Regulatory Specialist II

Letter Number: 518A00010985

RECEIVED
18 AUG 20 AM 6:35
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLES OF DISSOLUTION

FILED
2018 SEP 28 AM 11:40
SECRETARY OF STATE
TALLAHASSEE, FL

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:
Matlacha Mariners, Inc.

SECOND: The document number of the corporation (if known): N02000001241

THIRD: Adoption of Dissolution
(COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

JH (CHECK/COMPLETE ONE)

The date of meeting of members at which the resolution to dissolve was adopted

December 7th, 2017 - Annual Meeting

The number of votes cast by the members was sufficient for approval.

The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:


The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was _____.

The number of directors in office was _____ and the vote for resolution was _____ for and _____ against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: December 31, 2017
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signature: 

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Jerry Tolliver

(Typed or printed name of person signing)

Treasurer

(Title of person signing)

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. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Matlacha Mariners, Inc.

*Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the **Articles of Dissolution**.*

Description of information that must be included in a claim:

Copy of Actual Invoice or Copy of Purchase Order, with the Date of purchase or service.

Name and or signature of authorized Mariner (board member/ officer/ purchasing agent) making the purchase or authorizing services, delivery date of purchases or services.

Delivery address of where purchases or services were made.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Matlacha Mariners, Inc.,

C/O Claims Dissolution

PO Box ~~886~~ 21, Matlacha, FL 33993

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.

Jerry Tolliver

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