# N0800000

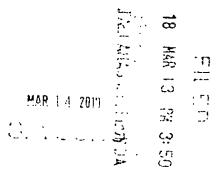
| (Re                                     | equestor's Name)   |             |  |  |
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| PICK-UP                                 | WAIT               | MAIL        |  |  |
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# COVER LETTER-

| Dissolution of Community Days In community                     |   |  |
|--|---|--|
| SUBJECT: Dissolution of Empower Peru Incorpora                 | ated  | <del></del>  |
| DOCUMENT NUMBER: N08000002610                                  | <del></del>   |  |
| The enclosed Articles of Dissolution and fee                   | are submitted for filing.   |  |
| Please return all correspondence concerning th                 | nis matter to the following:  |  |
| Mario Weber  |   |  |
| (Name of C   | Contact Person)   |  |
| (Firm/   | Company)  |  |
| 11545 SW 90th Street   |   |  |
| (Ad  | dress)  |  |
| Miami FL 33176   |   |  |
| (City/State  | and Zip Code)   |  |
| For further information concerning this matter                 | , please call:  |  |
| Mario Weber  | 786 <b>7</b> 57 3253  |  |
| (Name of Contact Person)                                       | _ at ( 786 757 3253 ( Area Code ) ( Dayti                             | me 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.<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |

# **MAILING ADDRESS:**

TO: Amendment Section

Division of Corporations

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

| FIRST:  | IRST: The name of the corporation as currently filed with the Florida Department of Sta  |   |           |           |     |  |  |
|---------|--|---|-----------|-----------|-----|--|--|
|         | Empower Peru Incorporated  |   |           |           |     |  |  |
| SECOND: | The document number of the corporation (if known): N08000002610  |   |           |           |     |  |  |
| THIRD:  | Adoption of Dissolution (COMPLETE SECTION I OR II)   | Ţ.  | 18 H      |           |     |  |  |
|         | SECTION I If the corporation has members entitled to vote:   |   | FR :3     | <u> </u>  |     |  |  |
|         | (CHECK/COMPLETE ONE) ☐ The date of meeting of members at which the resolution to dissolve was a  | i.<br>idop <u>te</u> d  | FH 3: 50  |           |     |  |  |
|         | 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 number of directors in office was $\frac{3}{}$ and the vote for resolution vand $\frac{0}{}$ against. (Must be a majority vote) | vas       | 3         | for |  |  |
| FOURTH  | Effective date of dissolution, <u>if applicable</u> : 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: Allos Signature: (By the chairman or vice chairman of the board, president or other officer- if directors have incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by                                       | re not bee  | n selecte | id, by an |     |  |  |
|         | Mario Weber  |   | •         |           |     |  |  |
|         | (Typed or printed name of person signing)  |   |           |           |     |  |  |
|         | President  |   |           |           |     |  |  |
|         | (Title of person signing)  |   |           |           |     |  |  |

Filing Fee: \$35