# N09000011590

(Requestor's Name)		
(Address)		
(Address)		
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only



400322716664

2019 JAN -11 MM 9: 00

AHA Diss

JAN 07 2019 I ALBRITTON



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 567825 4703995

AUTHORIZATION : Spell Blen

COST LIMIT : '\$' 35'.00

ORDER DATE: January 4, 2019

ORDER TIME : 9:42 AM

ORDER NO. : 567825-005

CUSTOMER NO: 4703995

## DOMESTIC FILINGS

NAME: DELTA KAPPA EPSILON COUNCIL,

INC.

XX \_\_ ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER'S INITIALS:

# **COVER LETTER**

Division of Corporations SUBJECT: \_\_ DELTA KAPPA EPSILON COUNCIL, INC. DOCUMENT NUMBER: N09000011590 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Barbara Bishop Gollan (Name of Contact Person) c/o Caithness Services LLC (Firm/Company) 565 Fifth Avenue, 29th Floor (Address) 565 Fifth Avenue, 29th Floor, New York New York 10017 (City/State and Zip Code) For further information concerning this matter, please call: Barbara Bishop Gollan (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) MAILING ADDRESS: STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

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: The name of the corporation as currently filed with the Florida Department of State: DELTA KAPPA EPSILON COUNCIL, INC. The document number of the corporation (if known): N09000011590 SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) ☐ The date of meeting of members at which the resolution to dissolve was adopted January 3, 2019 . The number of votes east 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) Effective date of dissolution, if applicable: January 3, 2019 **FOURTH** (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 decument's affective 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) Barbara Bishop Gollan (Typed or printed name of person signing) Treasurer

Filing Fee: \$35

(Title of person signing)