

P07000135610

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(Business Entity Name)

(Document Number)

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of Corporation

**DOCUMENT NUMBER:** PD7000135610

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

Please return all correspondence concerning this matter to the following:

Elizabeth A. Akom  
(Name of Contact Person)

Akom Financial Consultants Inc  
(Firm/Company)

2282 Killbuck Center Blvd Suite C  
(Address)

Tallahassee, Florida 32309  
(City/State and Zip Code)

For further information concerning this matter, please call:

Elizabeth A Akom at (850) 385-5400  
(Name of Contact Person) (Area Code & 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 32301

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
Clifton Building  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

eff 11/13

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

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Akom Financial Consultants, Inc.

SECOND: The document number of the corporation (if known): P07000135610

THIRD: The date dissolution was authorized: 12/3/12

Effective date of dissolution if applicable: 1/1/13

(no more than 90 days after dissolution file 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 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 approval by

\_\_\_\_\_  
(voting group)

Signature:

Ellen A. Akom President

(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)

Elizabeth A. Akom

(Typed or printed name of person signing)

President

(Title of person signing)

**Filing Fee: \$35**

\$ plus Certified Copy and Certificate of  
Statement