12/17/2018



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Tc:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338

Fax Number : (954)208-0845

DISSOLUTION OR WITHDRAWAL

FLORIDA STATE FARM EMPLOYEES ACTIVITIES ASSOCIATION,

Certificate of Status	()
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

Hectronic Filing Menu

Corporate Filing Menu

Help

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: FLORIDA STATE FARM EMPLOYEES ACTIVITIES ASSOCIATION, INCORPORATED			
SECOND:	The document number of the corporation (if known):			
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)			
	The document number of the corporation (if known): Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION I If the corporation has members chittled to vote:			
	(CHECK/COMPLETE ONE) The date of meeting of members at which the resolution to dissolve was adopted			
	The number of votes cost by the members was sufficient for approval.			
	☐ The resolution was adopted by written consent of the members and executed in accordance wit 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 August 27, 2013			
				The number of directors in office was $\frac{3}{2}$ and the vote for resolution was $\frac{3}{2}$ for and $\frac{0}{2}$ against. (Must be a majority vote)
				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 document's effective date on the Department of State's records.			
Signature: (By the chair fin or vice obtaining of the board, president or other officer-tridirectors have not been selected, by an incorporate-if in the hards of a receiver, trustee, or other count appointed riducinry, by that tiducinry) Thed submitted name of person signing)				
	President (Title of person signing)			

Filing Fee: \$35