

706492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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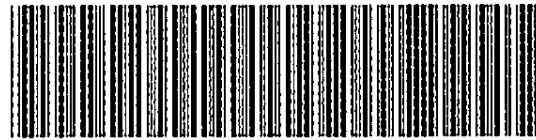
(Business Entity Name)

(Document Number)

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RICK R. MACLEAN
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A.G. MACLEAN



BRIAN V. BERGMAN
ADAN A. AULET, JR.*
AIMEE K. ARCE
LILLIAN T. NAGLE
* ALSO ADMITTED IN ILLINOIS

December 15, 2020

Transmitted via: **FEDERAL EXPRESS**
Tracking #7723-7437-1606

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re:

HOLY CROSS HOSPITAL AUXILIARY, INC., a Florida Not For Profit Corporation
Document Number 706492
Articles of Dissolution and Notice of Corporate Dissolution

Dear Sir or Madam,

Enclosed are Articles of Dissolution and a Notice of Corporate Dissolution submitted for filing with the Florida Department of State. Also enclosed is a check in the amount of \$35.00 as the filing fee for same.

Please return all correspondence concerning this matter to the undersigned.

Very Truly Yours,

MacLean and Ema, P.A.



Adan A. Aulet, Jr., Esq.
For the Firm

Encls./as noted

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:
HOLY CROSS HOSPITAL AUXILIARY, INC.

SECOND: The document number of the corporation (if known): 706492

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

December 14, 2020. The number of votes cast by the members was sufficient for approval.

with ☐ The resolution was adopted by written consent of the members and executed in accordance
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, 2020
(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: Doni Johnson
(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)

DONI JOHNSON

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

Filing Fee: \$35

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: HOLY CROSS HOSPITAL AUXILIARY, 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:

A brief description of the nature and basis of the claim, the amount of the claim, and the date the claim arose.

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

c/o MacLean and Ema, P.A.

2600 N.E. 14th Street Causeway

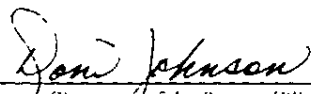
Pompano Beach, FL 33062

Attn: Adan A. Aulet, Jr., Esq.

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.

DONI JOHNSON, SECRETARY

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