

731003

(Requestor's Name)

(Address)

(Address)

(City/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



100291979681

12/05/16--01012--022 **35.00

FILED
2016 DEC -5 P 2:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 06 2016

T. LEMIEUX

DISS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Non-Profit Inc.

DOCUMENT NUMBER: 731003

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

Please return all correspondence concerning this matter to the following:

Francine Feldhandler/Dorothy White
(Name of Contact Person)

Emory Appliance Repair Service Inc.
(Firm/Company)

2530 Emory Drive East
(Address)

West Palm Beach, FL 33415
(City/State and Zip Code)

For further information concerning this matter, please call:

Francine Feldhandler 561-964-8524
or Dorothy White at (561-968-0039)
(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 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 12, 2016

FRANCINE FELDHANDLER
2530 EMORY DRIVE
W PALM BEACH, FL 33415

SUBJECT: EMORY APPLIANCE REPAIR SERVICE, INC.
Ref. Number: 731003

We have received your document for EMORY APPLIANCE REPAIR SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Non-profit corporation the document you sent in is for a Profit.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 716A00026379

RECEIVED
17 JAN 12 PM 2:15
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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:

EMDRX APPLIANCE REPAIR SERVICE, INC.

SECOND: The document number of the corporation (if known): 731003

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

_____. 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 date of adoption of the resolution by the board of directors was 11-30-16.

The number of directors in office was 4 and the vote for resolution was 4 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: 12-31-16
(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: Francine Feldhandler
(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)

FRANCINE FELDHANDLER
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)