

741434

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(Address)

(City/State/Zip/Phone #)

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T. LEMLEY

DISS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF A COOPERATION.

DOCUMENT NUMBER: 741434

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

Please return all correspondence concerning this matter to the following:

THERESA CARPENTER AND/OR THERESA GROOMS
(Name of Contact Person)

FAITH HEALING REVIVAL CENTER INC.
(Firm/Company)

2008 NE 899TH STREET
(Address)

OLD TOWN, FL 32680
(City/State and Zip Code)

For further information concerning this matter, please call:

THERESA GROOMS at (813) 629-0153
(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)

RECEIVED

(Previously Sent)

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

RECEIVED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2018

THERESA I GROOMS
P.O. BOX 12
LITHIA, FL 33547

SUBJECT: FAITH HEALING REVIVAL CENTER INC.
Ref. Number: 741434

We have received your document for FAITH HEALING REVIVAL CENTER INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a active corporation if you are wanting to dissolve the corporation you have to file articles of dissolution.

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: 818A00006897

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:

FAITH HEALING REVELAL CENTER INC

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

741434

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 September 1, 2017.

The number of directors in office was 3 and the vote for resolution was 3 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable:

June 1, 2018
(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:

Theresa V. Carpenter
(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)

THERESA CARPENTER
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

Filing Fee: \$35