## 750082

(Reque	stor's Name)	
(Addres	ss)	
, (Addres	ss)	
(City/St	ate/Zip/Phone #	<del>(</del> )
PICK-UP	WAIT .	MAIL
(Busine	ss Entity Name	)
(Docum	nent Number)	
Certified Copies	Certificates o	f Status
Special Instructions to Filin	g Officer:	
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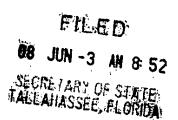
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## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Dissolution of Non Profit Corporation.		
DOCUMENT NUMBER:		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Rosemary Robinson		
Robinson  (Name of Contact Person)  The Harvest Recreation Association Inc.  (Firm/Company)  2900 S.w. 87  (Address)		
20100 S.w. 87 terrace		
Davie, Florida 33328-3613 (City/State and Zip Code)		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Gontact Person)	at (954) 474-4845 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	(interest of 2 styling in the control of the contro	
•	Standard Status & 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



## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following

Articles of D	issolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:  The Harvest Recreation Association, Inc.
SECOND:	The document number of the corporation (if known): 750082
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 the meeting of members at which the resolution to dissolve was adopted
	☐ 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
	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:
	(no more than 90 days after dissolution file date)
	Signature  (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.)
	Rosemary Robinson, Treasurer (Typed or printed name of the person signing)
	(Title of person signing)

FILING FEE: \$35