756939

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EFFECTIVE DATE

Dissolution

TB 12-77-05

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Association
DOCUMENT NUMBER: 756939
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Name of Contact Person) THE Woodlands of Cape Coral Homowners' Association Inc. (Firm/Company)
619 5.W. 6+ Street.
Cape Coral, Fl. 33991 (City/State and Zip Code)
For further information concerning this matter, please call: VEVIN US-ROWSET at (239) 470-6171 (Name of Contact Person) (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:
\$\text{\$\subset\$ \$\text{\$\text{S}}\$ Filing Fee \\ \text{Certificate of Status} \\ \text{Certified Copy} \\ \text{(Additional copy is enclosed)} \\ \text{\$\text{Certified Copy} \\ (Additional copy is enclosed)} \\ \text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{Certified Copy} \\ (Additional copy is enclosed)} \\ \text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{S}\$} \$\text{\$\text{Certified Copy} \\ (Additional copy is enclosed)} \\ \end{array}\$
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

Pursuant to : Articles of I	section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Dissolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	THE WOODlands of Cape Coral Homeowners Association INC.
SECOND:	The document number of the corporation (if known): 756939
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II) EFFECTIVE DATE
	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 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
	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 nee 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.) (Typed or printed name of the person signing)
	(Title of person signing)

FILING FEE: \$35