

758670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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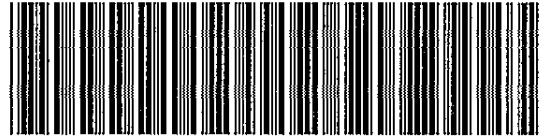
(Business Entity Name)

(Document Number)

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DISC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of not for profit corporation

**DOCUMENT NUMBER:** 758670

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

Please return all correspondence concerning this matter to the following:

**Dennis Peacha**

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(Name of Contact Person)

**RETARDED RECYCLERS**

(Firm/Company)

**3215 Oberlin Ave.**

(Address)

**ORLANDO, FL. 32804**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Dennis Peacha**

(Name of Contact Person)

**at (407)-422-4979**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: \$35.00 Filing Fee

**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 617.1401, 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:**  
**RETARDED RECYCLERS, INC**

**SECOND: The document number of the corporation (if known): # 758670**

**THIRD: The file date of the articles of incorporation: 1982**

**FOURTH The corporation has not commenced to conduct its affairs.**

**FIFTH: No debts of the corporation remains unpaid.**

**SIXTH: Adoption of Dissolution (CHECK ONE)**  
(Note: Cannot be authorized by an incorporator if the corporation has directors)

**X The dissolution was authorized by an incorporator.**

**Signature:** *Dennis I. Peacha*

(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)

**Dennis I. Peacha**

(Typed **or** printed name of person signing)

**President**

(Title **of** person signing)

**Filing Fee: \$35**

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