

761693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

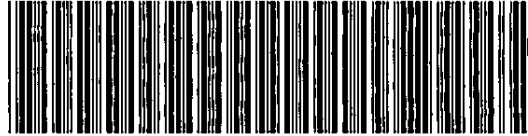
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 NOV 23 PM 12:49

NOV 25 2015

C LEWIS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Gulf Way Condominium Association, Inc.

**DOCUMENT NUMBER:** 761693

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

Please return all correspondence concerning this matter to the following:

Bradley W. Butcher, Esq.

\_\_\_\_\_  
(Name of Contact Person)

Butcher & Associates, PL

\_\_\_\_\_  
(Firm/Company)

6830 Porto Fino Circle, Suite 2

\_\_\_\_\_  
(Address)

Fort Myers, FL 33928

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Bradley W. Butcher

at ( 239 )

322-1651

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Area Code)

\_\_\_\_\_  
(Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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 Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:  
GULF WAY CONDOMINIUM ASSOCIATION, INC.

SECOND: The document number of the corporation (if known): 761693

THIRD: Adoption of Dissolution  
**(COMPLETE SECTION I OR II)**

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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### 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 \_\_\_\_\_.

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: December 31, 2015  
(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: Karen E. Muirhead  
(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)

Karen E. Muirhead

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**

## Notice of Corporate Dissolution

*This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.*

*This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.*

Name of Corporation: GULF WAY CONDOMINIUM ASSOCIATION, INC.

*Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.*

*Description of information that must be included in a claim:*

The date the obligation or claim arose; a copy of any invoice, contract, or written document evidencing the claim;

the amount of the claim; the name, address, telephone number, and e-mail address of the person or entity asserting the  
claim.

*Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)*

Karen E. Muirhead

Gulf Way Condominium Association, Inc.

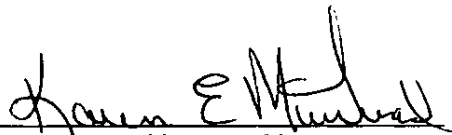
10650 Old Lake Shore Road

Irving, NY 14081

*A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.*

Karen E. Muirhead

*Printed Name of the Person Filing*

  
*Signature of the Person Filing*

**Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00**

# **GULF WAY CONDOMINIUM ASSOCIATION, INC.**

## **WAIVER OF NOTICE AND CONSENT TO DISSOLUTION**

Pursuant to the Florida Not for Profit Corporation Act, Fla. Stat. 617.0701(4), **GULFWAY 215, LLC**, a Florida limited liability company, being the owner of one hundred percent (100%) of the Condominium Units and having the right to exercise one hundred percent (100%) voting interests in the Condominium, hereby waives notice of a membership meeting, consents to, adopts, and approves the following resolutions:


**BE IT RESOLVED**, that in accordance with that certain Plan of Termination of Gulf Way Condominium, which Plan of Termination was recorded in the Official Records of Collier County, Florida in Official Records Book 5197 at Page 1875, on September 24, 2015, the Gulf Way Condominium is being terminated and the business and affairs of the Association are being wound down in accordance with such Plan of Termination; and

**BE IT FURTHER RESOLVED**, that the members owning of one hundred percent (100%) of the Condominium Units and having the right to exercise one hundred percent (100%) voting interests in the Condominium, hereby consent to and approve the filing of Articles of Dissolution dissolving the **GULF WAY CONDOMINIUM ASSOCIATION, INC.** effective December 31, 2015; and

**BE IT FURTHER RESOLVED**, that the members owning of one hundred percent (100%) of the Condominium Units and having the right to exercise one hundred percent (100%) voting interests in the Condominium, hereby direct Karen E. Muirhead, as President of **GULF WAY CONDOMINIUM ASSOCIATION, INC.**, to execute and file Articles of Dissolution in accordance with the Florida Not for Profit Corporation Act with the Florida Department of State, Division of Corporations and take any and all necessary acts to dissolve and wind up the affairs of **GULF WAY CONDOMINIUM ASSOCIATION, INC.** in accordance with these resolutions.

Dated: October 23, 2015

**GULFWAY 215, LLC**



By: Karen E. Muirhead  
Its: Manager