## 765927

(Requestor's Name)				
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(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(,,,				
(Document Number)				
Certified Copies Certificates of Status				

Special Instructions to Filing Officer:

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

January 26, 2009

RALPH L. DEBLOIS DEBLOIS TAX SERVICE 290 PARNELL STREET MERRITT ISLAND, FL 32953

SUBJECT: WAREHOUSE CONDOMINIUM ASSOCIATION, INC.

Ref. Number: 765927

We have received your document for WAREHOUSE CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 109A00002645

SECRETARY OF STATE TALL AHASSEE, FLORIOA

2009 FEB -2 AM 8:00

RECEIVED

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of	= Conponation
DOCUMENT NUMBER: 7459	27
The enclosed Articles of Dissolution and fee are	<i>'</i>
Please return all correspondence concerning this	matter to the following:
Rasph L.	DeBhols  tect Person)
·(Name of Con	tact Person)
290 Parrell	npany) Street
Menrit Isa	Street  ss)  (mnd, FL 32953  Izip Code)
(City/State and	Zip Code)
For further information concerning this matter, p	lease call:  at (
Enclosed is a check for the following amount:	
S35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$\ \text{S52.50 Filing Fee,} \\ \text{Certified Copy} & \text{Certificate of Status & Certified Copy} \\ \text{enclosed} & \text{Certified Copy} \\ \text{(Additional copy is enclosed)} \end{array}
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:			
	Warehouse Condominium Association, Loc			
SECOND:	The document number of the corporation (if known): 765927			
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 number of votes case by the median personal and the second pe			
				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 $\frac{13}{31/38}$			
	The number of directors in office was 3 and the vote for resolution was			
		for and against. (must be a majority vote)		

FOURTH:	Effective date of dissolution <u>if applicable</u> :	(no more than 90 days after dissolution file date)	
		(no more than 50 days after dissolution the 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.)

(Typed or printed name of the person signing)

DIR ECTOR

(Title of person signing)

FILING FEE: \$35