

770785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

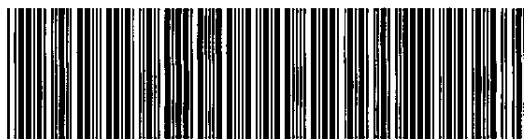
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 MAR 18 PM 2:09

T. Roberts MAR 20 2009

BASS, BERRY & SIMS PLC

Attorneys at Law

A PROFESSIONAL LIMITED LIABILITY COMPANY

Kelly N. Stovall
PHONE: (901) 543-5962
FAX: (800) 883-9607
E-MAIL: KStovall@bassberry.com

The Tower at Peabody Place
100 Peabody Place, Suite 900
Memphis, Tennessee 38103-3672
(901) 543-5900

March 16, 2009

VIA FEDERAL EXPRESS

Florida Department of State
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
(850) 245-6050

**Re: The Links at Carrollwood Condominium Association, Inc.
Our File Number: 111061-100**

Dear Sir or Madam:

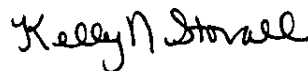
In connection with the above-referenced matter, enclosed please find the following:

1. Check in the amount of \$43.75 to cover the filing fee and certificate of status;
2. Cover Letter; and
3. Articles of Dissolution to be filed.

Please return the filed Articles of Dissolution and Certificate of Status to my attention.

I appreciate your help with this matter.

Sincerely,



Kelly N. Stovall

KNS:pbb

Enclosures:

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of The Links at Carrollwood Condominium Association, Inc.

DOCUMENT NUMBER: 770785

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

Please return all correspondence concerning this matter to the following:

Kelly N. Stovall

(Name of Contact Person)

Bass, Berry & Sims PLC

(Firm/Company)

100 Peabody Place, Suite 900

(Address)

Memphis, TN 38103

(City/State and Zip Code)

For further information concerning this matter, please call:

Kelly N. Stovall

(Name of Contact Person)

at (901) 543-5962

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

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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:
The Links at Carrollwood Condominium Association, Inc.

SECOND: The document number of the corporation (if known): 770785

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 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

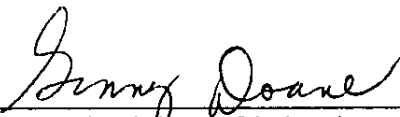
If the corporation has no members or members entitled to vote on the dissolution:

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: Upon Filing
(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.)

Ginny Doane
(Typed or printed name of the person signing)

President
(Title of person signing)

FILING FEE: \$35