

# G32149

\_\_\_\_\_  
(Requestor's Name)

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

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

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

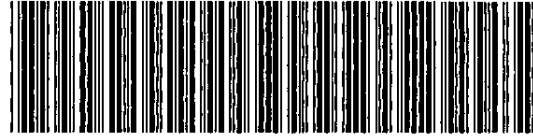
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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**FEB 27 2013**

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13 FEB 27 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2013

PAMELA DUGGAR CPA  
DUGGAR AND TRAYLOR LLC  
9191 R G SKINNER PKWY SUITE 601  
JACKSONVILLE, FL 32256

SUBJECT: ALLEN CHILDREN CENTERS INC  
Ref. Number: G32149

We have received your document for ALLEN CHILDREN CENTERS INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

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) 245-6820.

Rebekah White  
Regulatory Specialist

Letter Number: 713A00003228

RECEIVED  
13 FEB 25 AM 8:34  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2013

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Rebekah White  
Regulatory Specialist

Letter Number: 713A00003228

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Allen Children Centers Inc

**DOCUMENT NUMBER:** G32149

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

Please return all correspondence concerning this matter to the following:

Pamela Duggar, CPA

(Name of Contact Person)

Duggar and Traylor, LLC

(Firm/Company)

9191 R G Skinner Pkwy, Suite 601

(Address)

Jacksonville, Florida 32256

(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela Duggar

(Name of Contact Person)

at ( 904 )

725-5100

(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 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

Allen Children Centers Inc

SECOND: The document number of the corporation (if known): G32149

THIRD: The file date of the articles of incorporation: 04/03/1983

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

Signature: Barbara L. Allen

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Barbara L Allen

(Typed or printed name of person signing)

President

(Title of Person Signing)

FILED  
13 FEB 27 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$35