

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6380

From:

Account Name : BROAD AND CASSEL (ORLANDO)  
Account Number : I19980000090  
Phone : (407) 839-4200  
Fax Number : (407) 839-4264

DISSOLUTION OR WITHDRAWAL  
ZOM COMMUNITIES, INC.

Certificate of Status	1
Certified Copy	0
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14 OCT 28 PM 4:18

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CRM  
10-29-14

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:  
ZOM Communities, Inc.

SECOND: The document number of the corporation (if known): L92254

THIRD: The date dissolution was authorized: October 21, 2014

Effective date of dissolution if applicable: Date of filing Articles of Dissolution with the Department of State.  
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

- ☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.
- ☐ Dissolution was approved by the shareholders through voting groups.

*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_  
(voting group)

Signature: \_\_\_\_\_

(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)

Samuel C. Stephens, III

(Typed or printed name of person signing)

Executive Vice President

(Title of person signing)

Filing Fee: \$35

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### 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. 607.1407, F.S.

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

Name of Corporation: ZOM Communities, 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:

1. Full legal name, address and telephone number of claimant; and
2. Complete description, date and amount of claim.

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

ZOM Communities, Inc.  
2001 Summit Park Drive  
Suite 300  
Orlando, Florida 32810

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TALLAHASSEE, FLORIDA

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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.

Samuel C. Stephens, III, Executive Vice President

Printed Name of the Person Filing



Signature of the Person Filing