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DISSOLUTION OR WITHDRAWAL

Joseph & Madel Peluso Charitable Foundation, inc.

Certificate of Status	1
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Corporate Filing Menu

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9/29/2009

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Saytember 29, 7009

FLORIDA DEPARIMENT OF STATE

JOSEPH & MABEL PRIUSO CHARITABLE FORMATION, INC. C/O EUTERL LONG, P.C. 1290 NORTH FEDERAL HWY., SUITE 420 BOCA RATON, FL 33432

SURJECT: JOSEPH & MABEL PELUSO CHARITABLE FOUNDATION, INC.

REF: N00000004256

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Darlose Connell Regulatory Specialist II FAX Aud. #: 809000209603 Lettor Number: 609A00031721

P.O BOX 6327 - Tullahassoc, Florida 32314

ARTICLES OF DISSOLUTION

Pursuent to a Articles of D	section 617.1403, Florida Stannes, this Florida not for profit corporation submits the folk dissolution:	griwo		
FIRST:	The name of the corporation as currently filed with the Florida Department of State:			
	JOSEPH & MAREL PELUSO CHARITABLE FOUNDATION, INC.	31 200	_	
SECOND:	The document number of the corporation (If known): N00000004256		Do of	
TIURD:	Adoption of Dissolution (COMPLETE SECTION I OR II)	HASS		
	SECTION I If the corporation has members entitled to vote:	FF.FL		
	(CHECK/COMPLETE ONE)	STATE		
	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 recolution by the board of directors was July 28, 200	09 .		
	The number of directors in office was three and the vote for resolution was			
	three for and zero against. (must be a majority vote)			

FOURTII: Effective date of dissolution if applicable: (no more than 90 days after dissolution file date)

(By the chargean or vice chairman of the board, president or other visitor- 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.)

Jolyn H. Sellers
(Typod or printed name of the person signing)

Director
(Title of person signing)

FILING FEE: \$35