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(FAX)

P.001/002

Division of Corporations

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00000005116

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

From:

Account Name : GREENE HAMRICK QUINLAN SCHERMER & ESPOSITO, P.A.
Account Number : I19990000030
Phone : (941) 747-1871
Fax Number : (941) 745-2866

**DISSOLUTION OR WITHDRAWAL
MORE THAN CONQUERORS MINISTRIES AND FAMILY CHURCH
IN**

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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:
More Than Conquerors Ministries and Family Church, Inc.

SECOND: The document number of the corporation (if known): N00000005116

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 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 June 23, 2013

The number of directors in office was five (5) and the vote for resolution was five (5) for and NONE (0) against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: _____
(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)

Dr. Dale A. Fife

(Typed or printed name of person signing)

President

(Title of person signing)

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