

NO/0000000001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

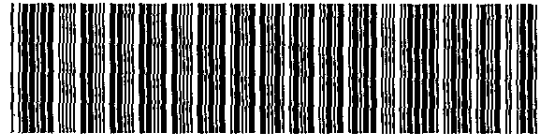
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



300064968293

VO/dis  
T. Leeks

02/06/06--01012--002 \*\*35.00

SECRETARY OF STATE  
FALL ARIZONA, 11 0000

06 FEB -6 PM 12:40

FILED

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SANTA ROSA ISLAND TRIATHLON, INC

**DOCUMENT NUMBER:** N01000000001

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

Please return all correspondence concerning this matter to the following:

ANN KNIGHT

(Name of Contact Person)

SANTA ROSA ISLAND TRIATHLON, INC.

(Firm/Company)

3601 MAULE ROAD

(Address)

PENSACOLA, FL 32503

(City/State and Zip Code)

For further information concerning this matter, please call:

ANN KNIGHT

(Name of Contact Person)

at ( 850 ) 434-1922

(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

FILED  
06 FEB -6 PM 12:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

SANTA ROSA ISLAND TRIATHLON, INC.

SECOND: The document number of the corporation (if known): N 01000000001

THIRD: Adoption of Dissolution  
(Complete Section I or II)

### SECTION I

If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted  
DECEMBER 11, 2005

(CHECK ONE)

- ☒ The number of votes cast for dissolution was sufficient for approval.
- ☐ The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes.

### SECTION II

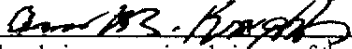
If the corporation has no members or members entitled to vote on the dissolution.

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: DECEMBER 30, 2005  
(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.)

ANN M. KNIGHT

(Typed or printed name of the person signing)

PRESIDENT

(Title of person signing)

**FILING FEE: \$35**