

**NO10000006344**

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

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

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

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

☐ PICK-UP    ☐ WAIT    ☐ MAIL

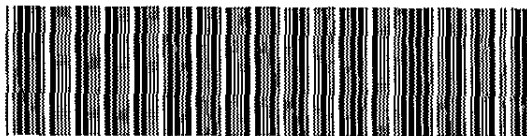
\_\_\_\_\_  
(Business Entity Name)

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

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

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07/17/06--01004--023 \*\*35.00

RECEIVED  
06 JUL 17 AM 10:50  
DEPT. OF REVENUE  
DIVISION OF REVENUE  
TALLAHASSEE, FLORIDA

FILED  
06 JUL 18 PM 4:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*\*00789, 00524, 00672 AR 7/18/06*

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165

305-552-5973

Office Use Only

### CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. HALEY SOFGE RESIDENT COUNCIL, INC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2.00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

- ☒ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

### AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

06 JUL 18 PM 4:19

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

July 17, 2006

Lazarus Corporate Filing Service  
3320 SW 87th St.  
Miami, FL 33165

SUBJECT: HALEY SOFGE RESIDENT COUNCIL, INC.  
Ref. Number: N01000006344

We have received your document for HALEY SOFGE RESIDENT COUNCIL, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please fill out EITHER section I or II in the third paragraph-not both sections. If you choose section I please fill in the date of adoption.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey  
Document Specialist

Letter Number: 606A00045689

ARTICLES OF DISSOLUTION

FILED  
06 JUL 18 PM 4:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

HALEY SOFGE RESIDENT COUNCIL, INC

SECOND: The document number of the corporation (if known): N01000006344

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  
\_\_\_\_\_

(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.**

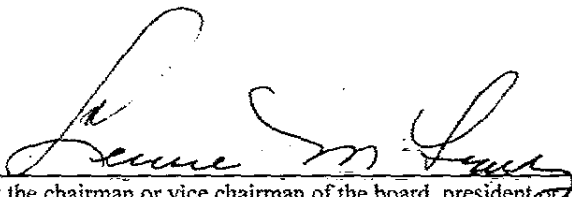
The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was 07/07/2006

The number of directors in office was three and the vote for resolution was

three for and zero against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: 07/10/2006  
(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.)

LENINE M. IBANEZ  
(Typed or printed name of the person signing)

PRESIDENT  
(Title of person signing)

**FILING FEE: \$35**