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| (| (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: | | | | |
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Office Use Only



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COVER LETTER

| TO: Amendment Section | | - Z |
|--|---|--|
| Division of Corporations | | |
| SUBJECT: <u>CEDAR CREEK LIA</u> | | MIC 14 PM 12:56 |
| DOCUMENT NUMBER: NO10000 | 08037 | |
| The enclosed Articles of Dissolution and fee are | e submitted for filing. | |
| Please return all correspondence concerning this | matter to the following: | |
| BETTY A. HUGHES (Name of Co. | | |
| (Name of Co | ntact Person) . | |
| (F:(C | | |
| (Firm/Co | • • • • | |
| 2080 NEW FOUND HAD | CROR UR | · · · · · · · · · · · · · · · · · · · |
| (Addr | ezz) | |
| MERRITT ISLAND FL (City/State an | 30953 | |
| (City/State an | d Zip Code) | |
| For further information concerning this matter, | please call: | |
| ROGER FLECK (Name of Contact Person) | at (321) 431-61 | 77 |
| (Name of Contact Person) | (Area Code) (Daytime Te | lephone Number) |
| Enclosed is a check for the following amount: | | |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | Certified Copy Cer (Additional copy is enclosed) (Ad | 50 Filing Fee, tificate of Status & tified Copy ditional copy is closed) |

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

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: CEDAR CREEN LIFE CENTER, INC The document number of the corporation (if known): NO1000008037 SECOND: 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 $\frac{6}{23/15}$. The number of directors in office was _____ and the vote for resolution was _____ for and _____ against. (Must be a majority vote) Effective date of dissolution, if applicable: 6/30/15 **FOURTH** (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 (hat fiduciary) ROGER FLECK
(Typed or printed name of person signing)

Filing Fee: \$35