

NOV 22 2016
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation

DOCUMENT NUMBER: N02000000605

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

Please return all correspondence concerning this matter to the following:

Samia Said

(Name of Contact Person)

Chancellor Charter @ N. Lauderdale PTO Inc

(Firm/Company)

1395 South State Road 7

(Address)

North Lauderdale, FL 33068

(City/State and Zip Code)

For further information concerning this matter, please call:

Samia Said

(Name of Contact Person)

at (954)

(Area Code)

973-8900

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☒ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2016

SAMIA SAID
CHANCECELLOR CHARTER
1395 SOUTH STATE ROAD 7
NORTH LAUDERDALE, FL 33068

SUBJECT: CHANCELLOR CHARTER AT N. LAUDERDALE PTO INC.
Ref. Number: N02000000605

We have received your document for CHANCELLOR CHARTER AT N. LAUDERDALE PTO INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must state the date the dissolution was authorized.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 216A00023911

RECEIVED
16 NOV 21 PM 4:56
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 25, 2016

SAMIA SAID
CHANCELLOR CHARTER
1395 SOUTH STATE ROAD 7
NORTH LAUDERDALE, FL 33068

SUBJECT: CHANCELLOR CHARTER AT N. LAUDERDALE PTO INC.
Ref. Number: N02000000605

We have received your document for CHANCELLOR CHARTER AT N. LAUDERDALE PTO INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete the document in its entirety.

The document must have original signatures.

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 816A00022903

RECEIVED
16 NOV -7 PM 1:25
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
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:
Chancellor Charter at North Lauderdale PTO, Inc

SECOND: The document number of the corporation (if known): No 2000000605

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 dissolved.

The number of directors in office was 0 and the vote for resolution was 0 for and 0 against. (Must be a majority vote).

FOURTH Effective date of dissolution, if applicable: 10/21/16
(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 that fiduciary)

Samia Elia Said

(Typed or printed name of person signing)

PTO Chair

(Title of person signing)

Filing Fee: \$35

PTO has been dissolved