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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of Corporation
DOCUMENT NUMBER: NO200000605
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)
(Name of Contact Person)
Chancellor Charter @ N. Lauderdale PTO Inc
1395 South State Road 7
North Lauderdale Fl 33068  (City/State and Zip Code)
For further information concerning this matter, please call:
Samia Said at (954) 973-8900
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee,  Certificate of Status Certified Copy (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)  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



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.

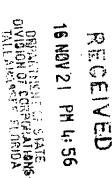
The document must state the date the dissolution was authorized.

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





## 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

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## ARTICLES GF 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: The document number of the corporation (if known): No20000605 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 number of directors in office was \_\_\_\_\_ and the vote for resolution was \_\_\_\_\_ for and \_\_\_\_\_ gainst. (Must be a majority vote) Effective date of dissolution, if applicable: **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 that fiduciary) omia Flia Said (Typed or printed name of person signing) PTO Chair
(Title of person signing)

has dissalved

Filing Fee: \$35