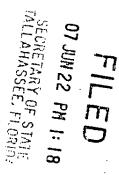
## N0200005528

(Re	equestor's Name)			
(Ac	ldress)			
(Ac	ldress)			
	•			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL MAIL		
(Bu	siness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



06/22/07--01020--009 \*\*43.75



## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations		
SUBJECT: Dissolution		
DOCUMENT NUMBER: NO200005	528	
The enclosed Articles of Dissolution and fee a	re submitted for	filing.
Please return all correspondence concerning this	is matter to the fo	ollowing:
Julie Norris		
	ontact Person)	
Mystic Eagle Cultural Association	on Inc.	
	Company)	** · · · · · · · · · · · · · · · ·
7152 224th st		
(Add	lress)	
O Brien, Fl. 32071	·····	
(City/State a	nd Zip Code)	
For further information concerning this matter,	please call:	
Julie Norris	at ( 386 )	935-2982
(Name of Contact Person)		de & DaytimeTelephone Number)
Enclosed is a check for the following amount:		
☐ \$35 Filing Fee	□\$43.75 Filing Certified Copy (Additional co- enclosed)	y Certificate of Status "
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	, ,	

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, 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 Sta	ate:		
	Mystic Eagle Cultural Association Inc.			
SECOND:	The document number of the corporation (if known): N0200005528			
THIRD:	The file date of the articles of incorporation: July 22, 2002	711K	07 ر	
FOURTH	The corporation has not commenced to conduct its affairs.	RETAR	07 JUN 22 PM 1: 1	****** *******
FIFTH:	No debts of the corporation remains unpaid.	í, or	2 PM	r n
SIXTH:	Adoption of Dissolution (CHECK ONE)  (Note: Cannot be authorized by an incorporator if the corporation has directors)	STATE	1:18	
	✓ The dissolution was authorized by a majority of the directors:  OR			
	☐ The dissolution was authorized by an incorporator.			
	☐ The dissolution was authorized by a majority of the incorporators.			
Sign	(By the chairman privice chairman of the board, president or other officer- if directors have selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fithat fiduciary)	not be	en ry, by	
	Julie Norris			
	(Typed or printed name of person signing)			
	C.E.O.			
	(Title of person signing)			

Filing Fee: \$35