

N02214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

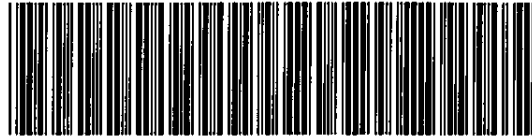
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800098917578

04/27/07--01034--020 **43.75

EFFECTIVE DATE
6/22/07

FILED
07 APR 27 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISS.

SP

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Workforce Council of Southwest Florida, Inc.

DOCUMENT NUMBER: N02214

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

Please return all correspondence concerning this matter to the following:

Mary Havener

(Name of Contact Person)

Workforce Council of Southwest Florida, Inc.

(Firm/Company)

P.O. Box 6964

(Address)

Fort Myers, FL 33911

(City/State and Zip Code)

For further information concerning this matter, please call:

Mary Havener

(Name of Contact Person)

at (239) 939-4949 or 931-8201 x11126

(Area Code & 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

EFFECTIVE DATE
6/22/07

FILED

ARTICLES OF DISSOLUTION

07 APR 27 PM 12:55

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:

Workforce Council of Southwest Florida, Inc.

SECOND: The document number of the corporation (if known): N02214

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 the 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 04/04/2007.

The number of directors in office was 9 and the vote for resolution was

7 for and 0 against. (must be a majority vote)

(2 directors absent from vote)

FOURTH: Effective date of dissolution if applicable: June 22, 2007
(no more than 90 days after dissolution file date)

Signature

Robert A. Newman, Treasurer
(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.)

Robert A. Newman

(Typed or printed name of the person signing)

Treasurer

(Title of person signing)

FILING FEE: \$35

Witnessed by Bonnie Gado, Board Member
BONNIE GADO

State of Florida

County of Lee

On April 20, 2007 before me,
Robert A. Newman and Bonnie Gado
Personally appeared, personally
known to me to subscribe to this
instrument and acknowledged to me
their authorized capacities to
execute this document.

NOTARY PUBLIC-STATE OF FLORIDA



Mary E. Havener
Commission # DD430006
Expires: MAY 16, 2009
Bonded Thru Atlantic Bonding Co., Inc.

Mary E. Havener