

N03000010412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

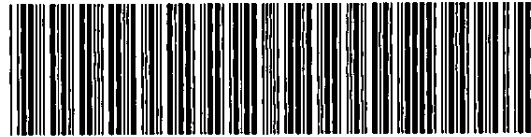
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
NOV 29 PM 4:17
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SUFFICIENCY OF FILING

NOV 30 2012

C. MUSTAIN

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 438376 4365401

AUTHORIZATION :

COST LIMIT : \$ 35

Spurlockman

ORDER DATE : November 29, 2012

ORDER TIME : 3:51 PM

ORDER NO. : 438376-005

CUSTOMER NO: 4365401

DOMESTIC FILINGS

NAME: MICHAEL P. KAHN FAMILY
FOUNDATION, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - EXT# 2926

EXAMINER'S INITIALS: _____

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:

Michael P. Kahn Family Foundation, Inc.

SECOND:

The document number of the corporation (if known): N03000010412

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 11/14/2012

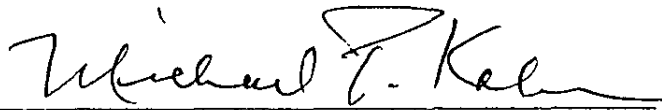
The number of directors in office was 3 and the vote for resolution was

3 for and 0 against. (Must be a majority vote)

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TALLAHASSEE, FLORIDA

FOURTH: Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

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.)

Michael P. Kahn

(Typed or printed name of the person signing)

President

(Title of person signing)

FILING FEE: \$35