N04000000 481

(Req	uestor's Name)	-
(Add	ress)	
(Add	iress)	
(City	/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
. (Bus	iness Entity Nan	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
		1

Office Use Only



400051357734

OS JUN 15 TPH L: 10
SECRETARY OF STATE
TALLAHASSEE, FLORIE

6/16/05 Diss.



Department of Environmental Protection

Jeb Bush Governor Marjory Stoneman Douglas Building 3900 Commonwealth Boulevard Tallahassee, Florida 32399-3000

Colleen M. Castille Secretary

June 10, 2005

Mr. Sean Toner
Division of Corporations
Florida Department of State
409 East Gaines Street
Tallahassee, Florida 32399

Dear Mr. Toner:

This letter is to request the dissolution of Friends of the Three Rivers State Parks, Inc. They were a duly authorized citizen support organization, which was under contract to provide support for the Division of Recreation and Parks in accordance with Section 258.015, F.S. Pursuant to F.S. 617.0122. This filing is exempt from any fees when certified by this department.

If further information is needed, feel free to contact Phillip Werndli at 245-3098.

Sincerely, Nike Bullak

Mike Bullock

Director

Florida Park Service

MB/jp

Attachments

COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT:	
DOCUMENT NUMBER:	
The enclosed Articles of Dissolution and fee ar	e submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Michael Hensley	of Person)
(Name o	f Person)
Manner - three Rivers	State Park
(Name of Fi	rm/Company)
7908 Three 1	Cives Park Rd-
(Addı	ess)
Sneads	FL 32460
(City/State/an	d Zîp Code)
For further information concerning this matter,	olease call:
Michael Hensley (Name of Person)	(Area Code & Davime Telephone Number)
(reality of totally	(Laber Cours at 2 and market 1 and
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	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, Florida 32314	STREET ADDRESS: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

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: SECOND: The document number of the corporation (if known):_____ THIRD: Adoption of Dissolution (Complete Section I or II) SECTION I If the corporation has members entitled to vote: The date of the meeting of members at which the resolution to dissolve was (CHECK ONE) The number of votes cast for dissolution was sufficient for approval. ☐ The resolution was adopted by written consent and executed in accordance with 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 May 27, 3005 The number of directors in office was _____ and the vote for resolution was for and _____ against. (must be a majority vote)

FOURTII: Effective date of dissolution if applicable	:
-	(no more than 90 days after dissolution file date)
Signed this day of Max	7 2005
Signature (By the chairman or vice chairman officer- if directors have not been the hands of a receiver, trustee, or by that fiduciary.)	selected, by an incorporator- if in
$\frac{\times \mathcal{B}_{V}:= \mathcal{F}_{V}g}{\text{(Typed or printed name)}}$	······································
Park Manager	- Disctor

FILING FEE: \$35