

No4000000912

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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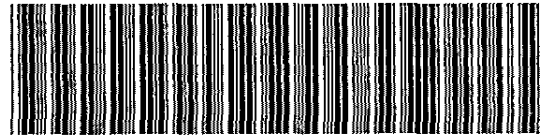
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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02/16/07--01015--021 \*\*35.00

FILED

07 FEB 16 PM 12:48

CLERK OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Airway Community Services Inc.

**DOCUMENT NUMBER:** N04000000912

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

Please return all correspondence concerning this matter to the following:

Jason Nappi

(Name of Contact Person)

Airway Community Services Inc

(Firm/Company)

10229 E Hwy 25

(Address)

Belleview FL 34420

(City/State and Zip Code)

For further information concerning this matter, please call:

Jason Nappi

(Name of Contact Person)

at (352) 326-2095

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |                                                     |                                                                        |                                                                                                     |                                                                                                                               |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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

ARTICLES OF DISSOLUTION

FILED  
07 FEB 16 PM 12:48  
CLERK OF THE COURT  
TALLAHASSEE, FLORIDA

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 State:

Airway Community Services Inc.

SECOND: The document number of the corporation (if known): NO 4-000000 912

THIRD: The file date of the articles of incorporation: 1/20/04

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution (CHECK ONE)

(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ 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.

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)

Jason Noppi

(Typed or printed name of person signing)

President/Owner

(Title of person signing)

Filing Fee: \$35