N04000001684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

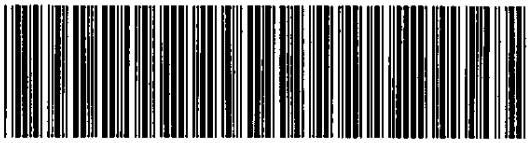
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/20/15--01023--004 **43.75

FILED
15 APR 20 AM 9:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

CRM
4-20-15

FILED
04 APR 20 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of incorporation

DOCUMENT NUMBER: N04000001684

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

Please return all correspondence concerning this matter to the following:

Judith Stein
(Name of Contact Person)

Florida Parental School Choice Consortium Inc
(Firm/Company)

1750 NE 167th Street, Tech 333
(Address)

North Miami Beach, FL 33162
(City/State and Zip Code)

For further information concerning this matter, please call:

Nigel Whyte at (954) 262-5082
(Name of Contact Person) (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

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:

Florida Parental School Choice Consortium

SECOND: The document number of the corporation (if known): N04000001684

THIRD: Adoption of Dissolution
(COMPLETE SECTION I OR II)

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15 APR 20 AM 9:0
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECTION I
If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)
☐ The date of 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 _____.

The number of directors in office was 1 and the vote for resolution was 1 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: March 1, 2015
(no more than 90 days after dissolution file date)

Signature: Judith S. Stein
(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)

Judith S. Stein
(Typed or printed name of person signing)

Treasurer
(Title of person signing)

Filing Fee: $35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

*This "***Notice of Corporate Dissolution***" is optional and is not required when filing a voluntary dissolution.*

Name of Corporation: Florida Parental School Choice Consortium Inc

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the **Articles of Dissolution.**

Description of information that must be included in a claim:

What is claim for, when, where and who is seeking claim against the not-for-profit organization Florida Parental School Choice Consortium formerly known as Florida Public School Choice Consortium.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Judith S. Stein
3500 N 46 Avenue
Hollywood, FL 33021

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Judith S. Stein
Printed Name of the Person Filing

Judith S. Stein
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately $35.00