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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

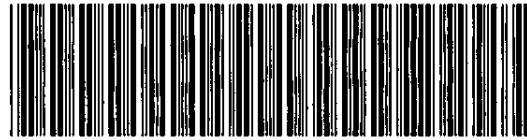
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C. CARROTHERS



99s FL Goldcoast Chapter

*Promoting the advancement of women in aviation
through education, scholarships, and mutual support.*



November 12, 2014

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Representative of the Amendment Section:

Enclosed you will find the **Articles of Dissolution** for the **Florida Goldcoast Chapter of the 99's, Inc.**, as well as **Articles of Incorporation** for the **Florida Goldcoast Chapter of the 99s, Inc.** I have attached a check in the amount of \$105.00 (one-hundred five dollars). Thirty-five dollars is the fee for dissolution and \$70.00 (seventy-dollars) is the fee for incorporating.

Please dissolve the **Florida Goldcoast Chapter of the 99's, Inc.** and incorporate the **Florida Goldcoast Chapter of the 99s, Inc.** I have enclosed a self-addressed stamped envelope and a copy of the forms. Please return a dated copy of the forms indicating approval of the dissolution and incorporation. If you have any questions, please call me at (732) 266-0685.

Thank you,

Myra Bugbee, Chair
Florida Goldcoast Chapter of the 99s
14234 NW 22nd Street
Pembroke Pines, FL 33028
(732) 266-0685

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Goldcoast Chapter of the 99's, Inc.

DOCUMENT NUMBER: N04000001816

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

Please return all correspondence concerning this matter to the following:

Myra J. Bugbee, Chair

(Name of Contact Person)

Florida Goldcoast Chapter of the 99's, Inc.

(Firm/Company)

14234 NW 22nd Street

(Address)

Pembroke Pines, FL 33028

(City/State and Zip Code)

For further information concerning this matter, please call:

Myra J. Bugbee

732

266-0685

at (_____) _____

(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 Goldcoast Chapter of the 99's, Inc.

SECOND: The document number of the corporation (if known): N04000001816

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 meeting of members at which the resolution to dissolve was adopted
October 11, 2014

_____ 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 _____ and the vote for resolution was _____ for and _____ against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: November 12, 2014
(no more than 90 days after dissolution file date)

Signature: Myra J. Bugbee
(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)

Myra J. Bugbee

(Typed or printed name of person signing)

Chair

(Title of person signing)

Filing Fee: \$35