ND4DDDD01908

| (Re | questor's Name |) |
|-------------------------|-------------------|--------------|
| | | |
| | | · |
| (Ad | ldress) | |
| | | |
| | | |
| (Ad | idress) | |
| | | |
| | | 1 |
| (Cit | ty/State/Zip/Pho | ne #) |
| | | |
| □ | — | |
| ☐ PICK-UP | MAIT | MAIL. |
| | | |
| | | |
| (Bu | isiness Entity Na | ame) |
| | | |
| | | |
| (Do | cument Numbe | r) |
| | | |
| | | |
| Certified Copies | _ Certificate | es of Status |
| | | ! |
| | | |
| | - O/C | 1 |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| ! | | |
| | | • |
| | | t |
| | | |
| | | |
| | | |
| | | |
| | | |





500306185035

12/04/17--01013--004 **43.75

TILTU 2017 DEC -4 AN IO: 28

AND 155 CC

DEC 0 5 2017
I ALBRITTON

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|--|
| SUBJECT: NOTICE OF CORPOR | ATE DISSOLUTION |
| DOCUMENT NUMBER: NO4000 | 001908 |
| The enclosed Articles of Dissolution and fee ar | e submitted for filing. |
| Please return all correspondence concerning this | matter to the following: |
| FLOYD E! MARTIN | |
| FLOYD E! MARTIN (Name of Co ROGER M. DAUBACH (Firm/Co | mact Person) FOUNDATION |
| · · · | |
| 1107 WOODBINE ST. | |
| FERN PARK, FL. 3, | |
| For further information concerning this matter, p | |
| FLOYD MARTIN | at (<u>407</u>) <u>733 - 3741</u> (Area Code) (Daytime Telephone Number) |
| (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 & S52.50 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 Articles of I | section 617.1403. Florida Statutes, this Florida not for profit corporation submits the following Dissolution: | | | | |
|------------------------------|---|--|--|--|--|
| FIRST: | The name of the corporation as currently filed with the Florida Department of State: | | | | |
| | ROGER M. DAUBACH FOUNDATION, INC. | | | | |
| SECOND: | ROGER M. DAUBACH FOUNDATION, INC. The document number of the corporation (if known): NO400000 1908 | | | | |
| THIRD: | Adoption of Dissolution (COMPLETE SECTION LOR II) | | | | |
| | SECTION 1 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 NOV. 2, 2017 | | | | |
| | The number of directors in office was 4 and the vote for resolution was 4 for and 5 against. (Must be a majority vote) | | | | |
| FOURTH | Effective date of dissolution, if applicable: | | | | |
| | (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. | | | | |
| | Signature: Ployd E, Martin (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) | | | | |
| | FLOY D E. MARTIN (Typed or printed name of person signing) | | | | |
| | 1 PRESIDENT | | | | |
| | (Title of person signing) | | | | |
| | Filing Fee: \$35 | | | | |