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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

Division of Corporations		
Dissolution of Filipino-America		e, Inc
DOCUMENT NUMBER: N04000002812		
The enclosed Articles of Dissolution and fee a	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Frederick J. Byrne		
(Name of C Filipino-American Society of Jacksonville,	Contact Person) Inc.	
(Firm/6 6366. Norse Dr.	Company)	
Jacksonville, Fl. 32244-2511	dress)	
(City/State a	and Zip Code)	
For further information concerning this matter, Frederick J. Byrne	904 0815	
(Name of Contact Person)	(Area Code) (Days	time 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)	

MAILING ADDRESS:

TO: Amendment Section

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 617.1401, 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: Filipino- American Society of Jacksonville, Inc.		
SECOND:	N0400002812 The document number of the corporation (if known):		
	April 14, 2006		
THIRD:	The file date of the articles of incorporation:		
FOURTH	The corporation has not commenced to conduct its affairs.		
FIFTH:	No debts of the corporation remains unpaid.		
SIXTH:	The corporation has not commenced to conduct its affairs. No debts of the corporation remains unpaid. 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.		
Sign	Errederick J. Byrne President (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)		
	Frederick J. Byrne		
	(Typed or printed name of person signing)		
	President		
	(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. Filipino-American Society of Jacksonville Name of Corporation:____ 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: Our board of directors have decided to end our association. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Frederick J. Byrne 6366 Norse Dr. Jacksonville, Fl. 32244-2511 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.

Frederick J. Byrne

Printed Name of the Person Filing