

N04000004890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

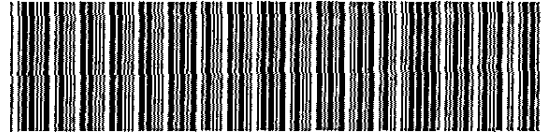
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900049479429

04/04/05--01028--014 **43.75

FILED
05 APR -4 AM 11:07
CLERK OF STATE
TALLAHASSEE, FLORIDA

Gr Vol 1

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF KAHIRUP ASSOCIATION OF CENTRAL FLORIDA

DOCUMENT NUMBER: N04000004890

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

Please return all correspondence concerning this matter to the following:

ELSA MONTALLANA

(Name of Person)

KAHIRUP ASSOCIATION OF CENTRAL FLORIDA, INC.

(Name of Firm/Company)

4420 WITHROWWOOD CT.

(Address)

ORLANDO, FLORIDA 32837

(City/State/and Zip Code)

For further information concerning this matter, please call:

ELSA MONTALLANA

(Name of Person)

at (773) 600-0517

(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, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

FILED
05 APR -4 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

KAHIRUP ASSOCIATION OF CENTRAL FLORIDA, INC.

SECOND: The document number of the corporation (if known): N04000004890

THIRD: Adoption of Dissolution
(*Complete Section I or II*)

SECTION I

If the corporation has members entitled to vote:

- The date of the meeting of members at which the resolution to dissolve was adopted
_____.

(CHECK ONE)

- ☐ The number of votes cast for dissolution was sufficient for approval.
- ☐ The resolution was adopted by written consent and executed in accordance with 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 MARCH 1, 2005.

The number of directors in office was 7 and the vote for resolution was

7 for and 0 against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: MARCH 1, 2005
(no more than 90 days after dissolution file date)

Signed this 22ND day of MARCH, 2005

Signature

Elsa Montallana

(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.)

ELSA MONTALLANA

(Typed or printed name of the person signing)

CHAIRMAN OF THE BOARD OF TRUSTEES & DIRECTORS & PRES.

(Title of person signing)

FILING FEE: \$35