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## Florida Department of State Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850) 205-8842

Fax Number

: (850)878-5368

# DISSOLUTION OR WITHDRAWAL FIT NATION FOUNDATION, INC.

Certificate of Status	0
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## **COVER LETTER**

TO: Amendment Section	Eg 🛶	
Division of Corporations		
SUBJECT: Fit Nation Foundation, Inc.	1 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 -	
DOCUMENT NUMBER: N05000005442		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concern	ing this matter to the following:	
Katherine Tullos		
(Nar	me of Contact Person)	
Gardere Wynne Sewell LLP		
	(Firm/Company)	
1601 Elm Street, Suite 3000		
(a., a., 100 mm - 1	(Address)	
Dalias, Texas 75201		
(City	//State and Zip Code)	
For further information concerning this r	natter please call	
Katherine Tullos	214 999-4347	
(Name of Contact Person)	at (	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following an	nount:	
□ \$35 Filing Fee □ \$43.75 Filing F Certificate of S	tee & U \$43.75 Filing Fee & U \$52.50 Filing Fee, Status Certified Copy (Additional copy is enclosed)  Certificate of Status & Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section	
Amendment Section Division of Corporations	Amendment Section  Division of Cornorations	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:						
	Fit Nation Foundation, Inc.	No.					
SECOND:	The document number of the corporation (if known): N05000005442	10.10	JUL 9				
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)	ASSET OF	-6 AH	i			
	SECTION I If the corporation has members entitled to vote:	0818A	9: 28	1			
	(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 $\frac{2}{2}$ and the vote for resolution was $\frac{2}{2}$ and $\frac{0}{2}$ against. (Must be a majority vote)		for				
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, be listed as the document's effective date on the Department of State's records.		will not				
	Signature:  (By the chairman of 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, mustee, or other court appointed fiduciary, by that fiduciary)						
	Greg P. Laird						
	(Typed or printed name of person signing)						
	Director						
	(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	s not required when filing a voluntary dissolution.
Name of Corporation: Fit Nation Foundation, Inc.	
Date of dissolution will be the date the dissolution is filed of Dissolution.	with the Department of State or as specified in the Article
Description of information that must be included in a claim	m:
A written claim must include the claimant's name, address, and	phone number, the date of the alleged claim, the factual basis
for any alleged claim, the dollar amount of such claim, and any	other information that would be necessary to review
and access the claim.	
Mailing address where claims can be sent: (Claims cannot 5080 Spectrum Drive, Suite 609E	t be sent to the Division of Corporations)
Addison, Texas 75001	
A claim against the above named corporation will be barr within 4 years after the filing of this notice.	red unless a proceeding to enforce the claim is commenced
Greg P. Laird, Director	(2m P-10)
Printed Name of the Person Filing	Signature of the Person Filing