NO5000006494

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Nymber)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100105097261

07/09/07--01057--011 **43.75

VB

07 JUL -9 PM 2: U

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: ONE THOUSAND & EIGHT WELLS FOUNDATION, INC.
DOCUMENT NUMBER: N0500006494
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JADEINE SHIVES
(Name of Contact Person)
CHAIRPERSON
(Firm/Company)
1620 SANDY OAK DRIVE
. (Address)
DAVENPORT, FL 33896
(City/State and Zip Code)
For further information concerning this matter, please call:
JADEINE SHIVES at (407) 396-7476
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
S35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \bigsquare \\$43.75 Filing Fee & \bigsquare \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) 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

FILED 07 JUL -9 PM 2:01 ARTICLES OF DISSOLUTION JECNETARY OF STATE JALLAHASSEE, FLORIDA

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:
	ONE THOUSAND AND EIGHT WELLS FOUNDATION, INC .
SECOND:	The document number of the corporation (if known): N05000006494
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
	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: (no more than 90 days after dissolution file date)

Signature

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.)

JADEINE SHIVES

(Typed or printed name of the person signing)

CHAIRPERSON

(Title of person signing)

FILING FEE: \$35