

NO50000008820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

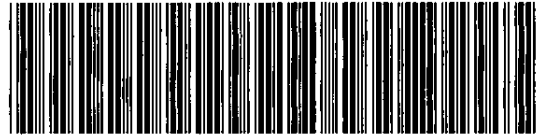
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700074879307

05/30/06--01026--005 \*\*35.00

FILED  
06 MAY 30 AM 10:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9 vol

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CHARLOTTE AREA BUSINESS ALLIANCE, INC.

**DOCUMENT NUMBER:** N05000008820

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

Please return all correspondence concerning this matter to the following:

MICHAEL NEUFELD  
(Name of Contact Person)  
CHARLOTTE AREA BUSINESS ALLIANCE  
(Firm/Company)  
250 TAMMAM TR UNIT 12 #176  
(Address)  
PORT CHARLOTTE, FL 33948  
(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL NEUFELD at ( 941 ) 268-7918  
(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 & 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

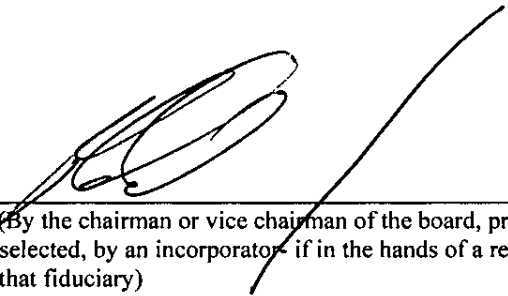
## ARTICLES OF DISSOLUTION

Pursuant to 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:  
CHARLOTTE AREA BUSINESS ALLIANCE, INC
- SECOND: The document number of the corporation (if known): NO5000008820
- THIRD: The file date of the articles of incorporation: 8/26/05
- FOURTH: The corporation has not commenced to conduct its affairs.
- FIFTH: No debts of the corporation remains unpaid.
- SIXTH: 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.

FILED  
06 MAY 30 AM 10:08  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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)

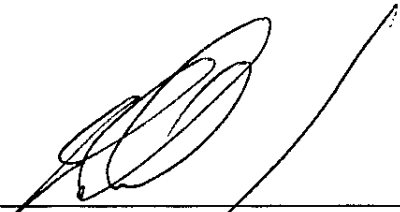
MICHAEL NEUFELD  
(Typed or printed name of person signing)

SECRETARY/TREASURER  
(Title of person signing)

Filing Fee: \$35

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.)

MICHAEL NEUFELD

(Typed or printed name of the person signing)

SECRETARY / TREASURER

(Title of person signing)

**FILING FEE: \$35**