

N05000009263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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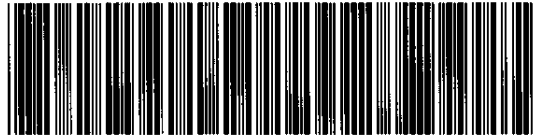
(Business Entity Name)

(Document Number)

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2009 JUN 15 AM 11:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Dis.

TB

6/17/09

**To:** Amendment Section  
Division of Corporations

6/9/09

**Re:** Dissolution of Prayer Body Deliverance and Healing Ministry  
**Section 617.1403, Florida Statutes**

**Return Address:** Allison Edwards-Wiley  
31250 Triborough Drive  
Wesley Chapel, Fl 33545

**Telephone Number:** (813) 929-7810

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DISSOLUTION OF  
PRAYER BODY DELIVERANCE AND HEALING MINISTRY, INC.

**DOCUMENT NUMBER:** N05000009263

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

Please return all correspondence concerning this matter to the following:

ALLISON EDWARDS-WILEY  
(Name of Contact Person)

PRAYER BODY DELIVERANCE AND HEALING MINISTRY, INC.  
(Firm/Company)

FORMERLY 11739 N. 15<sup>th</sup> Street, Tampa, FL 33613  
(Address)

TAMPA, FL 33613 { Current Address of Contact Person  
(City/State and Zip Code) 31250 Triborough Dr. Wesley Chapel  
FL 33545. }

For further information concerning this matter, please call:

ALLISON EDWARDS-WILEY at ( 813 ) 929-7810  
(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

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## 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:

PRAYER BODY DELIVERANCE & HEALING MINISTRY, INC.

SECOND: The document number of the corporation (if known): N05000009263

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 4/4/09

The number of directors in office was 2 and the vote for resolution was

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

*Other members of the board have resigned prior to this date. paw*

FOURTH:

Effective date of dissolution if applicable:

6/9/09

(no more than 90 days after dissolution file date)

Signature

Allison Edwards-Wiley (Treasurer)

(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.)

ALLISON EDWARDS-WILEY

(Typed or printed name of the person signing)

(TREASURER)

(Title of person signing)

**FILING FEE: \$35**