## 1105000011443

| (Re                     | equestor's Name)   |           |
|-------------------------|--------------------|-----------|
| (Ad                     | dress)             | <u></u>   |
| (Ad                     | dress)             |           |
| (Cit                    | ty/State/Zip/Phone | #)        |
| PICK-UP                 | ☐ WAIT             | MAIL      |
| (Bu                     | siness Entity Nan  | ne)       |
| (Do                     | ocument Number)    |           |
| Certified Copies        | _ Certificates     | of Status |
| Special Instructions to | Filing Officer:    |           |
|                         |                    |           |
|                         |                    |           |
|                         |                    |           |

Office Use Only



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OS PH 4: 44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D.55

## COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

| Division of Corporations  |  |
|---|--|
| SUBJECT: DISSOLUTION  | of Second Bethel B<br>Chuech   |
| DOCUMENT NUMBER: N D5DD   | DD11443  |
| The enclosed Articles of Dissolution and fee  | are submitted for filing.  |
| Please return all correspondence concerning th  | nis matter to the following:   |
| Ross & Brchwar  | Contact Person)  |
| Ross Solution   | ZNC Company)   |
| 608 James   | Stesst   |
| Jax 7 382   | dress)  St / and Zip Code)   |
| For further information concerning this matter  ROSS C BROWNET (Name of Contact Person) |  |
| Enclosed is a check for the following amount:   |  |
| \$35 Filing Fee \$\sum \$43.75 Filing Fee & Certificate of Status                       | S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
| MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327               | STREET ADDRESS: Amendment Section Division of Corporations Clifton Building  |

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

ocration submits the following

| Pursuant to s<br>Articles of I | section 617.1401, Florida Statutes, this Florida not for profit corporation submits the following Dissolution:  |
|--------------------------------|---|
| FIRST:                         | The name of the corporation as currently filed with the Florida Department of State:  Second Behaz Boptist Church Lucorpulus  |
| SECOND:                        | The document number of the corporation (if known): NOSOVOD 11445  |
| THIRD:                         | The file date of the articles of incorporation: $11-11-95$  |
| 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.  |
| Sign                           | ature: Amas Bankhead  |
| J                              | (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) |
|                                | AMOS BANKHeto/ (Typed or printed name of person signing)  |
|                                | President<br>(Title of person signing)  |

Filing Fee: \$35

FOURTH: Effective date of dissolution if applicable: F201024, 3006 (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.)

(Typed or printed name of the person signing)

(Title of person signing)

FILING FEE: \$35