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## **COVER LETTER**

TO: Amendment Section

**Division of Corporations** 

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

SUBJECT: Articles of Dissolution/ Dr. E. C. Smith Ministries, Inc.			
DOCUMENT NUMBER: #N06000004	95	<del></del>	
The enclosed Articles of Dissolution and fee ar	re submitted for filing.		
Please return all correspondence concerning this	s matter to the following:	:	
Ellene Smith			
(Name of Co	ontact Person)		
Dr. E. C. Smith Ministries, Inc.			
(Firm/C	ompany)		
P. O. Box 3484			
(Add	ress)		
Jacksonville, FL 32206			
(City/State ar	nd Zip Code)		
For further information concerning this matter,	please call:		
Pastor Ellene Smith	at (904 ) 768-2	2963	
(Name of Contact Person)	(Area Code & Dayt	imeTelephone 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	STREET ADDRESS: Amendment Section		

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## ARTICLES OF DISSOLUTION

FILED

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation pubmits the following Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Dr. E. C. Smith Ministries, Inc. The document number of the corporation (if known): #N06000000495 SECOND: √2006 ( The file date of the articles of incorporation: 1-17-THIRD: The corporation has not commenced to conduct its affairs. **FOURTH** FIFTH: No debts of the corporation remains unpaid. Adoption of Dissolution (CHECK ONE) SIXTH: (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. (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) Ellene Smith (Typed or printed name of person signing) President (Title of person signing)

Filing Fee: \$35