

N06000000/162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

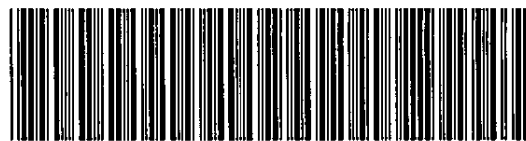
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer

Pastor Dennis  
Jones gave  
permission to correct  
suffix in Name &  
choose Section I  
to approve  
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Office Use Only

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DC



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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 6, 2014

PASTOR DEVON JONES  
BLESSED HOPE MINISTRY INCORPORATED  
27 RED CLOVER LANE  
PALM COAST, FL 32164

SUBJECT: BLESSED HOPE MINISTRY INCORPORATED  
Ref. Number: N06000001162

We have received your document for BLESSED HOPE MINISTRY INCORPORATED, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell  
Regulatory Specialist III

Letter Number: 614A00016599

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14 AUG 25 PM 3:38  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles Dissolution

**DOCUMENT NUMBER:** 614A00016599

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

Please return all correspondence concerning this matter to the following:

Devon A Jones  
(Name of Contact Person)

Blessed Hope Ministry Incorporation  
(Firm/Company)

27 Red Clover Ln  
(Address)

Palm Coast FL 32164  
(City/State and Zip Code)

For further information concerning this matter, please call:

Devon Jones A at (386) 864-8227  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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

**07 / 28 / 2014**

**N06000001162**

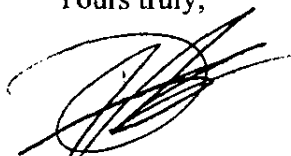
Blessed Hope Ministry Incorporation  
27 Red Clover Ln  
Palm Coast Florida 32164

Department of State  
Division of Corporations  
Corporate Filings  
PO Box 6327  
Tallahassee, Fl. 32314

To Whom It May Concern:

This letter is to inform you that on the ( 5 / 19 / 2014 ), the Blessed Hope Ministry Incorporated is no longer doing Business in the State of Florida and request that our account be closed at this time. Thank you for your kind support over the years.

Yours truly,



Pastor Devon Jones  
President

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14 AUG -1 PM 4:14

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## 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:

Blessed Hope MINISTRY Incorporated

SECOND: The document number of the corporation (if known): NO6000001162

THIRD: Adoption of Dissolution  
**(COMPLETE SECTION I OR II)**

### SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

☐ The date of meeting of members at which the resolution to dissolve was adopted

\_\_\_\_\_. The number of votes cast by the members was sufficient for approval.

☒ The resolution was adopted by written consent of the members and executed in accordance with section 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 5/19/14.

The number of directors in office was 3 and the vote for resolution was 3 for and 0 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)

DEVON A JONES  
(Typed or printed name of person signing)

President  
(Title of person signing)

Filing Fee: \$35