

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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. (Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Dissolution of the non-profit Corporation filedin June 2006 (toussaint l'Overature de DOCUMENT NUMBER: 000076483550 for Arts & Ed
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Intesarter Kawi, CPA (Name of Contact Person)
(Name of Contact Person)
(Firm/Company)
Winter Sprang, fl. 32708 (City/State and Zip Code)
(Address)
Winter Spring, fl. 32708
(City/State and Zip Code)
For further information concerning this matter, please call:
The sac textour at (401) 327-9364 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
Sas Filing Fee \$\bigs\ \$43.75 \text{ Filing Fee & \$\bigs\ \$43.75 \text{ Filing Fee & \$\bigs\ \$52.50 \text{ Filing Fee, } \\ Certificate of Status & Certified Copy & Certified C

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:		
	toussaint L'Overature foundation for Arts And Education The document number of the corporation (if known): ND6 00000 6730		
SECOND:	The document number of the corporation (if known): NDL DDDD 6730		
THIRD:	The file date of the articles of incorporation: June 22nd, 2006		
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 OR		
	☐ The dissolution was authorized by an incorporator.		
	☐ The dissolution was authorized by a majority of the incorporators.		
Signa	ature: A Mountal Labo Sr.		
	(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 person signing)		
	Vice President (Title of person signing) AND SERVICE STREET SERVICE STREET SERVICE STREET SERVICE SERVICE STREET SERVICE SERV		
	Filing Fee: \$35		