N06000008132

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	

Ronna Willams advised to make Correction in Mame

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COVER LETTER

TO: Amendment Section

Division of Corporations	•
SUBJECT: Partners Against Crime E	nterprise, INC.
DOCUMENT NUMBER: N0600000813	2
The enclosed Articles of Dissolution and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Angelette Green	
(Name of Con	<u> </u>
(Fi/Co	
(Firm/Co	snpany)
(Addre	ess)
Belle Glade, Florida 33430	
(City/State and	d Zip Code)
For further information concerning this matter, p	olease call:
Ronnie Williams	at (561) 449-6244
(Name of Contact Person)	(Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
	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 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:
	Partners Against Crime Enterprise INC.
SECOND:	The document number of the corporation (if known): NO6000008132
THIRD:	The file date of the articles of incorporation: August 1, 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
	☐ The dissolution was authorized by an incorporator.
	☐ The dissolution was authorized by a majority of the incorporators.
Sign	ature: (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)
	Angelette Green
	(Typed or printed name of person signing)
•	President
	(Title of person signing)

Filing Fee: \$35