## N06000008381

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## **COVER LETTER**

**Division of Corporations** SUBJECT: SIENA TOWNHOMES HOMEDWIERS ASSOCIATION INC. DOCUMENT NUMBER: N 06 0000 8381 The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/Company) TAMPA FL 33601
(City/State and Zip Code) For further information concerning this matter, please call: at (813) 842-2110

(Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: ▼ \$35 Filing Fee \$43.75 Filing Fee & \$\Bigs\tag{\$43.75 Filing Fee & \$\Bigs\tag{\$52.50 Filing Fee,}\$ Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed) **STREET ADDRESS: MAILING ADDRESS:** Amendment Section Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

ARCHINA DO MILLONDING TO 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:
	SIENA TOWN HOMES HOMEOWNERS ASSOCIATION INC
SECOND:	The document number of the corporation (if known): NO60000 30
THIRD:	The file date of the articles of incorporation: $\frac{08/08/06}{}$
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.
	1 \ 1 A
Signa	(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)
	ALEXANDRA MAZZACURATI  (Typed or printed name of person signing)
	DVST
	(Title of person signing)

Filing Fee: \$35