N070000000156

(Requestor's Name)	_
(Address)	
(Address)	_
, ,	
(City/State/Zip/Phone #)	
(GRYStates Elph World III)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	
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COVER LETTER

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SUBJECT: Dissolution of Corporation	
DOCUMENT NUMBER: N070000001	56
The enclosed Articles of Dissolution ar	nd fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
Gerald K. Brummer	
(Na	ime of Contact Person)
Ostomy Support Group of Citrus County, Inc.	
	(Firm/Company)
34 Grass Street	
	(Address)
Homosassa, FL. 34446-6115	
(City	y/State and Zip Code)
For further information concerning this	matter, please call:
Gerald K. Brummer	at (352 586-9103
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following an	nount:
■ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Section

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

TO: Amendment Section

Division of Corporations

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Ostomy Support Group of Citrus County, Inc.1/2007
SECOND:	The document number of the corporation (if known):
THIRD:	The file date of the articles of incorporation: $\frac{1/207}{1/8/2607}$
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:
	☐ The dissolution was authorized by an incorporator.
	☐ The dissolution was authorized by a majority of the incorporators.
Sign selected, by	ature:
	Gerald K. Brummer
	(Typed or printed name of person signing)
	Trreasurer
	(Title of person signing)

Filing Fee: \$35