N0700000 5215

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Document Number)		
Certified Copies	Certificate:	s of Status
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Portico Condominiums Association. Inc	
DOCUMENT NUMBER: N070000005215	
The enclosed Articles of Dissolution and fee a	are submitted for filing.
Please return all correspondence concerning th	is matter to the following:
Daniel J. Perka	
(Name of C	Contact Person)
Portico Condominiums Association, Inc.	
(Firm/C	Company)
14400 Covenant Way	
(Add	dress)
Lakewood Ranch, Florida 34202	
(City/State a	and Zip Code)
For further information concerning this matter,	please call:
Daniel J. Perka	at () 757-1612
(Name of Contact Person)	at (941 757-1612 (Daytime Telephone Number)
Enclosed is a check for the following amount:	
	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

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: Portico Condominiums Association, Inc.	
SECOND:	The december of the control of the N07000005215	
SECOND.	The document number of the corporation (it known):	
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)	<u></u> د ا
	CECTION 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 market of action and bush a mark as a second of the first of the f	
	. The number of votes cast by the members was sufficient f approval.	or
	■ The resolution was adopted by written consent of the members and executed in accordance section 617.0701, Florida Statutes.	e with
	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	_•
	The number of directors in office was and the vote for resolution was and against. (Must be a majority vote)	for
FOURTH	Effective date of dissolution, if applicable: Dec. 19, 2019 (no more than 90 days after dissolution file date)	-
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will be listed as the document's effective date on the Department of State's records.	not
	Signature: (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected.)	ov an
	incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	•
	Kirk Boylston	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: Portico Condominiums Association, Inc.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Artic of Dissolution.
Description of information that must be included in a claim:
Persons with claims against the corporation are requested to present them in accordance with this notice. Each such claim
must be in writing and must include: 1) the grounds for the claim; 2) type of relief sought for claim, if monetary, the amount;
3) copies of any documents supporting claim, i.e contracts, work orders, invoices, statements; 4) date on which claim arose;
and 5) the name, mailing address, and telephone number of the claimant. Claims must contain sufficient information to
reasonably inform the corporation of the identity of the claimant and substance of the claim.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
14400 Covenant Way, Lakewood Ranch, Florida 34202, Attention: Daniel J. Perka
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commence within 4 years after the filing of this notice.
. —
Kirk Boylston
Printed Name of the Person Filing Signature of the Person Filing