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SECRETARY OF STATE

RSR-8/20109

COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: Hope Meadows Dissoluti	on		
DOCUMENT NUMBER: N0800000224	47		
The enclosed Articles of Dissolution and fee an	re submitted t	for filing.	
Please return all correspondence concerning thi	s matter to th	e following	; :
John H. Capiro			
(Name of Co	ontact Person)		
Hope Meadows Inc.			
(Firm/C	ompany)		
5775 Reynolds Rd			
(Add	ress)		
Lake Worth, FL 33449			
(City/State ar	nd Zip Code)		
For further information concerning this matter,	please call:		
John H. Capiro	at (561	236-	0100
(Name of Contact Person)		<u> </u>	timeTelephone Number)
Enclosed is a check for the following amount:			
✓ \$35 Filing Fee \$43.75 Filing Fee & [Certificate of Status	\$43.75 Fill Certified C (Additiona enclosed)	Сору	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		Amendm Division Clifton B	F ADDRESS: ent Section of Corporations Building ecutive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation salonits the Articles of Dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: Hope Meadows Inc. The document number of the corporation (if known): N08000002247SECOND: The file date of the articles of incorporation: 03/05/2008 THIRD: **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. Signature: (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) John H. Capiro (Typed or printed name of person signing) President (Title of person signing)

Filing Fee: \$35