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COVER LETTER

TO: Amendment Section

Division of Corporations
SUBJECT: Dissolution of Resurrection Ranch of Oc
DOCUMENT NUMBER: <u>1/0800004436</u>
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tyron V. Barnes (Name of Contact Person)
Resurrection Ranch of Ocala Inc (Firm/Company)
8653 SW 45th St Rd (Address)
Ocala FL 34481 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Tyron Barnes at (352) 209-5647 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$43.75 Filing Fee & \$\bigsquare \\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 25, 2010

TYRON J. BARNES RESURRECTION RANCH OF OCALA, INC. 8653 SW 45TH STREET ROAD OCALA, FL 34481

SUBJECT: RESURRECTION RANCH OF OCALA, INC.

Ref. Number: N08000004436

We have received your document for RESURRECTION RANCH OF OCALA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 810A00001884

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: Legirection Ranch of Ocala Inc The document number of the corporation (if known): 108000004436 SECOND: Adoption of Dissolution THIRD: (COMPLETE SECTION I OR II) SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) The date of the meeting of members at which the resolution to dissolve was whopted. _____. The number of votes cast by the members was sufficient for approval. The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. 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

__ for and _____ against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: 1-1-2010 (no more than 90 days after dissolution file date)

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.)

Typed or printed name of the person signing)

(Title of person signing)

FILING FEE: \$35