

N08000005018

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

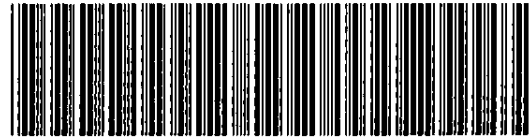
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/16/11--01019--011 **35.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

11 NOV 16 PM 1:05

FILED

*Effective date
12-31-11*

*Vo/dis w/notice
Tlew's
11-16-11*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Close of Organization - Victory Outreach North Miami, Inc.

DOCUMENT NUMBER: N08000005018

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Valencia Moss

(Name of Contact Person)

Victory Outreach North Miami Inc.

(Firm/Company)

P.O. Box 610187

(Address)

North Miami, FL 33261

(City/State and Zip Code)

For further information concerning this matter, please call:

Valencia Moss

(Name of Contact Person)

at (786) 376-4894

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 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

STREET ADDRESS:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2011

VALENCIA MOSS
VICTORY OUTREACH NORTH MIAMI INC.
P.O. BOX 61087
NORTH MIAMI, FL 33261

SUBJECT: VICTORY OUTREACH NORTH MIAMI INC.
Ref. Number: N08000005018

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 911A00022395

ARTICLES OF DISSOLUTION

FILED
11 NOV 16 PM 1:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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:

Victory Outreach North Miami Inc.

SECOND: The document number of the corporation (if known): N08000005018

THIRD: Adoption of Dissolution
(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 adopted

_____ 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.

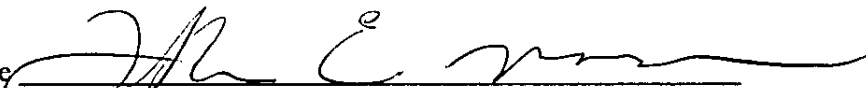
The date of adoption of the resolution by the board of directors was September 23rd, 2011

The number of directors in office was 5 and the vote for resolution was

5 for and 0 against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: December 31, 2011
(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.)

Franklin Moss

(Typed or printed name of the person signing)

President-Director

(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: Victory Outreach North Miami Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

It is concluded that Victory Outreach North Miami Inc. can and will no longer conduct
business. We have not been able to meet the physical and financial
obligations needed to continue on.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Franklin Moss

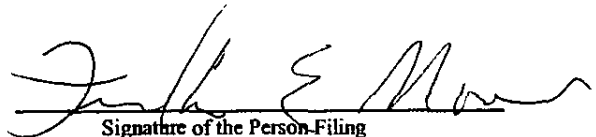
P.O. Box 610187

North Miami, FL 33261

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Franklin Moss

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00