

N08000005262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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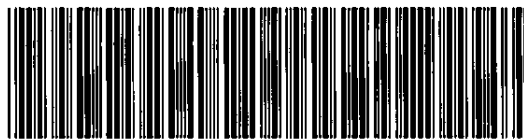
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ADJISS  
6/19/09

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Venice Performing Arts Series, Inc.

**DOCUMENT NUMBER:** N08000005262

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

Please return all correspondence concerning this matter to the following:

Debra Cooper

Name of Contact Person

Venice Performing Arts Series, Inc.

Firm/Company

4915 Avon Lane

Address

Sarasota, FL 34238

City/State and Zip Code

mail@veniceperformingarts.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Debra Cooper

Name of Contact Person

at ( 941 ) 284-5972

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee      ☐ \$43.75 Filing Fee & Certificate of Status      ☐ \$43.75 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  
Tallahassee, FL 32314

**Street Address:**

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

## 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:

Venice Performing Arts Series, Inc.

SECOND: The document number of the corporation (if known): N08000005262

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 6/1/2009.

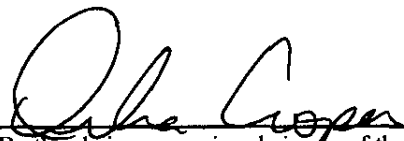
The number of directors in office was 4 and the vote for resolution was  
4 for and 0 against. (must be a majority vote)

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FOURTH:

Effective date of dissolution if applicable: 6/1/2009  
(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.)

Debra Cooper

(Typed or printed name of the person signing)

President

(Title of person signing)

**FILING FEE: \$35**