

NO8000007925

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

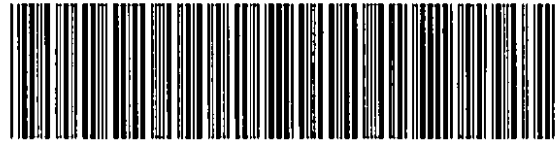
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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12/21/18--01020--022 **43.75

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18 DEC 21 PM 4:27

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

JAN 05 2019

S. YOUNG

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Articles of Dissolution

DOCUMENT NUMBER: N08000007925

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

Please return all correspondence concerning this matter to the following:

Lawrence Weiner, Esq.

(Name of Contact Person)

Weiner & Cummings, P.A.

(Firm/Company)

1428 Brickell Avenue, Suite 400

(Address)

Miami, FL 33131

(City/State and Zip Code)

For further information concerning this matter, please call:

Lawrence Weiner

at (305)

371-7800

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" 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

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:
THE SLOMIN FAMILY CENTER FOR AUTISM AND RELATED DISABILITIES, INC.

SECOND: The document number of the corporation (if known): N08000007925

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 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.

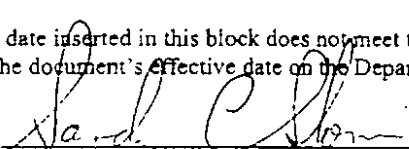
The date of adoption of the resolution by the board of directors was _____.

The number of directors in office was 6 and the vote for resolution was 6 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: Date of Filing but no later than December 31, 2018

(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 not be listed as the document's effective date on the Department of State's records.

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)

Sandra C. Slomin

(Typed or printed name of person signing)

Chairman - President

(Title of person signing)

Filing Fee: \$35

FILED
18 DEC 21 PM 4:28
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**THE SLOMIN FAMILY CENTER FOR
AUTISM AND RELATED DISABILITIES, INC.**

PLAN OF DISTRIBUTION

KNOW ALL MEN BY THESE PRESENTS THAT, the corporation hereby adopts the following Plan of Distribution of assets in accordance with the provisions of Florida Statutes Sections 617.1406, as follows:

1. A majority of the Board of Directors hereby agrees that the corporation shall be dissolved, effective as of the date of filing Articles of Dissolution with the Florida Department of State but no later than December 31, 2018.

2. Sandra C. Slomin as Chairperson of this corporation is hereby authorized, empowered, and directed to cause the filing of Articles of Dissolution substantially in the form attached hereto and made a part hereof as Exhibit A.

3. From and after the date of this Resolution, the dissolved corporation shall continue its corporate existence until December 31, 2018 or earlier but shall not conduct any additional business or affairs except to the extent appropriate to wind up and liquidate the affairs of the corporation.

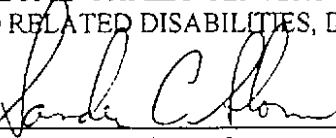
4. The cash assets of the corporation shall be used to discharge or make provision for discharge of all liabilities and obligations of the corporation.

5. To the extent the corporation has non-cash assets, such non-cash assets either shall be sold and liquidated in an orderly manner or in the alternative shall be paid over and distributed to one or more other charitable organizations which constitute charitable organizations in accordance with the provisions of Section 501(c)(3) of the Internal Revenue Code and which are formed or operate for purposes which approximate the purposes for which this corporation heretofore has been formed and operated. Sandra C. Slomin as Chairperson of the corporation is hereby authorized, empowered, and directed to complete such sale and/or disposition of such non-cash assets in such manner as she shall reasonably determine.

6. All remaining cash assets of the corporation after completion of the payment of all obligations and liabilities of the corporation, or adequate divisions have been made therefor shall be transferred or conveyed to one or more charitable organizations described above engaged in activities substantially similar to those of this corporation; and Sandra C. Slomin as Chairperson of this corporation is hereby authorized, empowered, and directed to complete such transfers and conveyances to such other organizations in such manner as she shall reasonably determine.

IN WITNESS WHEREOF, the undersigned Chairperson as Chief Executive Officer of the corporation hereby certifies to each and all of the foregoing provisions of this Plan of Distribution.

THE SLOMIN FAMILY CENTER FOR AUTISM
AND RELATED DISABILITIES, INC.

By: 
Sandra C. Slomin, CEO

LAW OFFICES
WEINER & CUMMINGS, P.A.
4TH FLOOR
1428 BRICKELL AVENUE
MIAMI, FLORIDA 33131

LAWRENCE WEINER*
PAUL M. CUMMINGS**
BETH MOSKOWITZ LAZAR***

JANE M. WEINER (RETIRED)

* ADMITTED IN FL AND PA
** ADMITTED IN FL ONLY
*** ADMITTED IN FL, IL AND KY

TELEPHONE
(305) 371-7800
FACSIMILE
(305) 371-3226
www.wcvlaw.com

December 20, 2018

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**Re: The Slomin Family Center for Autism and Related Disabilities, Inc.
Document Number: N08000007925**

Dear Sir/Madam:

Enclosed for filing are Articles of Dissolution regarding the above non-profit corporation. Also enclosed is an additional copy of the Articles of Dissolution and Plan of Distribution; we hereby request a certified copy be issued.

Also enclosed is a check made payable to the Florida Department of State in the amount of \$43.75 in payment of the filing fee and the fee for certified copy.

If there are any questions or any additional information or documentation is needed, please telephone the undersigned collect.

Thank you very much.

Very truly yours,


LAWRENCE WEINER

LW/efs

Enclosures

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