

10/25/2013 07:39

Alron Inc.

(FAX) 321-723-8218

P.001/003

Division of Corporations

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N09000003240

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number (850) 617-6380

From: Account Name ALRON ENTERPRISES, INC.
Account Number I20000000113
Phone (321) 951-7626
Fax Number (321) 723-8218

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 OCT 25 AM 9:43

APPROVED
AND
FILED

**DISSOLUTION OR WITHDRAWAL
RESTORATION FELLOWSHIP WORSHIP CENTER, INC.**

Certificate of Status		0
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

C. LEWIS
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10/25/2013 07:40

Alron Inc.

(FAX) 3217238218

APPROVED
AND
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13 OCT 25 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:
RESTORATION FELLOWSHIP WORSHIP CENTER, INC.

SECOND: The document number of the corporation (if known): N09000003246

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

10-21-2013

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 12-31-2013

The number of directors in office was 1 and the vote for resolution was 1 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: 12-31-2013
(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)

THOMAS IPSEN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

10/25/2013 07:40

Alron Inc.

(FAX) 3217238218

P. 003/003

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AND
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13 OCT 25 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: RESTORATION FELLOWSHIP WORSHIP CENTER, 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:

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

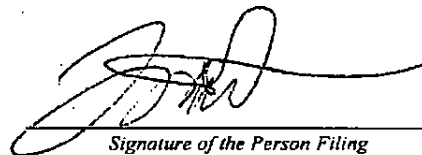
955 ELMONT ST NW

PALM BAY, FL 32907

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.

THOMAS IPSEN

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