N09000004067	
(Requestor's Name) (Address) (Address)	200196016302
(City/State/Zip/Phone #)	03/07/1101066018 **25.00 03/25/1101023004 **10.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	VD
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 11, 2011

TRACY CARSON 3629 VICTORIA MANOR DR F212 LAKELAND, FL 33805

SUBJECT: PROJECT HALO INC Ref. Number: N09000004067

We have received your document for PROJECT HALO INC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution for a nonprofit corporation must comply with either section 617.1401 or 617.1403, Florida Statutes.

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

The fee to file your document is \$35.

There is a balance due of \$10.00.

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) 245-6892.

Tina Roberts Regulatory Specialist II

Letter Number: 111A00005865

# **COVER LETTER**

TO: Amendment Section Division of Corporations

Project Halo Inc. Dissolution SUBJECT: \_\_\_\_

DOCUMENT NUMBER: NO900000 4067

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

Please return all correspondence concerning this matter to the following:

(Name of Contact Person)	
(Firm/ 3629 Victoria Ma (Ad Lakeland, F1	Company) amor Dr. F212 idress)
Lakeland, Fl	33 80 5 and Zip Code)
For further information concerning this matter <u>Tracy</u> <u>Carson</u> (Name of Contact Person) Enclosed is a check for the following amount:	r, please call: at ( <u>904</u> ) <u>495-3564</u> (Area Code & DaytimeTelephone Number)
	<ul> <li>\$43.75 Filing Fee &amp; \$52.50 Filing Fee, Certified Copy</li> <li>(Additional copy is enclosed)</li> <li>\$52.50 Filing Fee, Certificate of Status &amp; Certified Copy</li> <li>(Additional copy is enclosed)</li> </ul>
MALEING ADDRESS: Amanument 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:

Project Halo Inc

SECOND: The document number of the corporation (if known): <u>N09000004067</u>

THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II)

## SECTION I If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

 $\bigvee$  The date of the meeting of members at which the resolution to dissolve was adopted

3/3/11 . 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:

3/3

(no more than 90 days after dissolution file date)

(ais 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.)

Tracy L. Carson (Typed or printed name of the person signing)

(Title of person signing)

FILING FEE: \$35