

109000004519

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

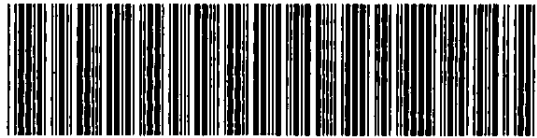
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/25/10--01006--010 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 OCT 21 PM 3:21

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Was
filed
10/21

AFFIDAVIT OF SPIDERMAN S. MULHOLLAND

STATE OF FLORIDA)
)ss:
COUNTY OF ALACHUA)

COMES NOW, SPIDERMAN S. MULLHOLLAND, who, being first duly sworn on oath.

deposes and says as follows:

1. I am over the age of 18 and otherwise sui juris.
2. I am the President of Building Envelope Science Institute, Inc., a not for profit corporation.
3. I have been the President of Building Envelope Science Institute, Inc., a Non-Profit Corporation since May 2009.
4. I am the President of the new for Profit Corporation, with the same name, Building Envelope Science Institute, Inc.
5. I am the President of the new S. Corporation, with the same name, Building Envelope Science Institute, Inc.
6. I am aware that Building Envelope Science Institute, Inc., was previously used however since I am the originator of the previous Non-Profit Corporation and no significant business was performed under the Non-Profit Corporation, I fully accept responsibility of opening the new for profit Corporation with the same name.

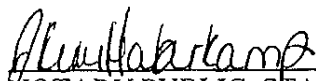
FURTHER AFFIANT SAYETH NAUGHT

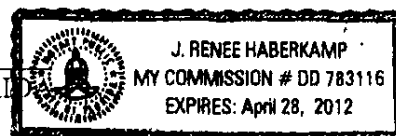

SPIDERMAN S. MULHOLLAND

FLTDL H445797613850

The foregoing instrument was sworn to and acknowledged before me this 15 day of October, 2010 by SPIDERMAN S. MULHOLLAND, who is personally known to me and who did take an oath.

My Commission Expires: 4/28/2012


NOTARY PUBLIC, STATE OF FLORIDA



RECEIVED

10 OCT 21 AM 8:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolve as Non-Profit

DOCUMENT NUMBER: N09000004519

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

Please return all correspondence concerning this matter to the following:

Robert A. Lash

(Name of Contact Person)

Moody, Salzman & Lash

(Firm/Company)

500 E. University Avenue, Suite A

(Address)

Gainesville, FL 32601

(City/State and Zip Code)

For further information concerning this matter, please call:

Donna

(Name of Contact Person)

at (352) 373-6791

(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

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, 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:

Building Envelope Science Institute, Inc.

SECOND: The document number of the corporation (if known): N09000004519

THIRD: The file date of the articles of incorporation: 05/07/2009

FOURTH: The corporation has not commenced to conduct its affairs.

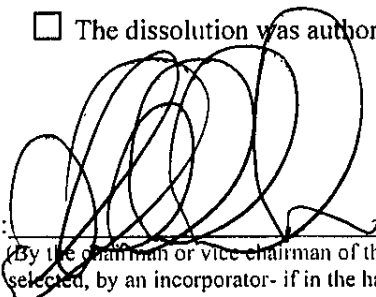
FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**
(Note: Cannot be authorized by an incorporator if the corporation has directors)

☒ The dissolution was authorized by a majority of the directors:
OR

☐ The dissolution was authorized by an incorporator.

☐ The dissolution was authorized by a majority of the incorporators.

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)

Spiderman S. Mulholland

(Typed or printed name of person signing)

President

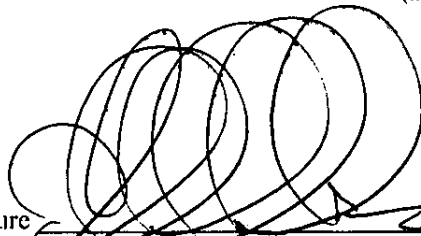
(Title of person signing)

Filing Fee: \$35

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TALLAHASSEE, FLORIDA

FOURTH: Effective date of dissolution if applicable: October 14, 2010
(no more than 90 days after dissolution file date)

Signature

A large, stylized handwritten signature consisting of several overlapping loops, resembling a spider web or a series of 'S' shapes.

(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.)

Spiderman S. Mulholland

(Typed or printed name of the person signing)

President

(Title of person signing)

FILING FEE: \$35