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(Re	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Co	2 RPORATION
DOCUMENT NUMBER: Nogood	000 6267
The enclosed Articles of Dissolution and fee ar	re submitted for filing.
Please return all correspondence concerning this	s matter to the following:
Reginald L-	GUNDY mtact Person)
(Name of Co	entact Person)
Floring Southern	harafran / EARTHRUP (ONE STATE West A
(Firm/C	hristian LEADERSIHIP CONF. State Un.t. One ompany)
2049 NORT	th Pean 1 St. Suite 2 ress)
(Add	ress)
JACKSDI	wille, FL 32206
(City/State ar	nd Zip Code)
For further information concerning this matter,	please call:
REGINALD L- GUNDY	at (909) 583 5595 (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\sum_{\text{Certificate of Status}}\$\$\$	□ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed) □ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations P.O. Box 6327	Division of Corporations
1.0. DUX 0341	Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

.Tallahassee, FL 32314

MLED

ARTICLES OF DISSOLUTION

Pursuant to s Articles of E	section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Dissolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Floring Swithern Christian Leadership Conf. State Unit conc
SECOND:	The document number of the corporation (if known): N0900006267
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
	March 1, 2015. 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 Manch 1, 20,15.
	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: March 1, 2015 (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)
	(Typed or printed name of person signing)
	(Title of person signing)
	(Time of person digiting)

Filing Fee: \$35