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AUG 28 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	
Shree Kali T SUBJECT: To Dissolve Investors for	emple in Conjunction with - Domestic Abuse Incorporated
DOCUMENT NUMBER: 000159219840	
The enclosed Articles of Dissolution and fee are submit	tted for filing.
Please return all correspondence concerning this matter	to the following:
Hemala Lall (Name of Contact Pers	on)
(Firm/Company) 6239 Bolling Drive (Address)	
6239 Bolling Drive (Address) Oclando, Fl 32808 (City/State and Zip Con	ie)
For further information concerning this matter, please ca	
Hemal Lall at (407) 298-2239 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount: \$\Bigsim \\$35 \text{ Filing Fee } \Bigsim \\$43.75 \text{ Filing Fee & } \Bigsim \\$43.75 \text{ Certificate of Status } Certificate o	5 Filing Fee & \$\bigcup\$\$52.50 Filing Fee, ied Copy Certificate of Status & Certified Copy
MAILING ADDRESS: Amendment Section Division of Corporations	(Additional copy is enclosed) STREET ADDRESS: Amendment Section Division of Corporations

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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: Shree Kali Temple in Conjunction with
	Investigators For Domestic Abuse Incorporated
SECOND:	The document number of the corporation (if known): NOS 00000 7565
THIRD:	The file date of the articles of incorporation: Aug 4 2009
OURTH	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 \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
	FOR TOTAL STATE OF THE STATE OF
Signa	ature: Henriala Lall
	(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)
	Vice President (Title of person signing)

Filing Fee: \$35