

N09000007958

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

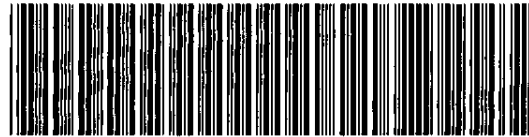
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600212222646

09/26/11--01046--004 **43.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP 26 PM 2:31

AMY DISS

CC
10 @ 9/27/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of The Potter's Hands Ministries, Inc

DOCUMENT NUMBER: N09000007958

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

Please return all correspondence concerning this matter to the following:

Sheila G. Smith

(Name of Contact Person)

The Potter's Hands Ministries, Inc

(Firm/Company)

P.O. Box 76

(Address)

Wausau, FL 32463

(City/State and Zip Code)

For further information concerning this matter, please call:

Sheila G. Smith

(Name of Contact Person)

at (850) 638-9797

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☒ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$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

9/20/71

To Whom It May Concern

We were trying to start a ministry in my home but it fell apart. And 2 of my sons were killed in accidents within 18 months apart needless to say we can not continue so we had a meeting between those concerned and closed the meetings. We did not acquire anything and did not have a bank account.

Shirley Smith

P.O. Box 76

Wausau, WI 54980

850-638-9797

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:

THE POTTER'S HANDS MINISTRIES, INC.

SECOND: The document number of the corporation (if known): N09000007958

THIRD: The file date of the articles of incorporation: August 14, 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)

Sheila G. Smith

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

Filing Fee: \$35

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 SEP 26 PM 2:31