

1090000938

(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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04/25/11--01024--039 **35.00

EFFECTIVE DATE
5-1-11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 APR 25 AM 9:47

FILED

DISG/2/104-a
42871

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION

DOCUMENT NUMBER: N09000009738

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

Please return all correspondence concerning this matter to the following:

CHARLENE THOMPSON

(Name of Contact Person)

HIS SERVANT AND YOURS MINISTRIES INC

(Firm/Company)

1968 RICHARD LANE

(Address)

WEST PALM BEACH, FL 33406

(City/State and Zip Code)

For further information concerning this matter, please call:

CHARLENE THOMPSON

(Name of Contact Person)

at (561) 308-1227

(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

EFFECTIVE DATE
3-1-11

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:

HIS SERVANT AND YOURS MINISTRIES INC

SECOND: The document number of the corporation (if known): N09000009738

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 the meeting of members at which the resolution to dissolve was adopted
_____. 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 3-1-2011.

The number of directors in office was 2 and the vote for resolution was
2 for and 0 against. (must be a majority vote)

2011 APR 25 AM 9:47
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT
MILWAUKEE, WISCONSIN

FOURTH: Effective date of dissolution if applicable: MAY 1, 2011
(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.)

CHARLENE THOMPSON
(Typed or printed name of the person signing)

TREASURER
(Title of person signing)

FILING FEE: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: HIS SERVANT AND YOURS MINISTRIES INC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

ALL DOCUMENTATION IS TO INCLUDE DATES AND NAMES OF AUTHORIZATION AS WELL AS A COPY OF INVOICE

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

C/O CHARLENE THOMPSON

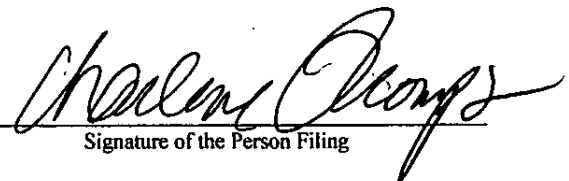
1968 RICHARD LANE

WEST PALM BEACH, FL 33406

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

CHARLENE THOMPSON

Printed Name of the Person Filing



Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00