

1109000010637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

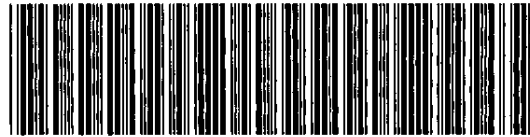
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/09/12--01033--009 **35.00

2012 JAN 20 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Dissolve/note
[Signature]
1-23-12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF:
FLORIDA SOUTHEAST REGIONAL SOCCER ASSOC.

DOCUMENT NUMBER: N 09000010637

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

Please return all correspondence concerning this matter to the following:

ARTHUR L. SUITE

(Name of Contact Person)

FLORIDA SOUTHEAST REGIONAL SOCCER ASSOC.

(Firm/Company)

1101 COLONY POINT CIR # 411 BLDG 4

(Address)

PEMBROKE PINES FL 33026

(City/State and Zip Code)

For further information concerning this matter, please call:

ARTHUR L. SUITE

(Name of Contact Person)

at (954) 437 9181

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2012

ARTHUR L. SUITE
FLORIDA SOUTHEAST REGIONAL SOCCER ASSOC.
1101 COLONY POINT CIR #411 BLDG 4
PEMBROKE PINES, FL 33026

SUBJECT: FLORIDA SOUTHEAST REGIONAL SOCCER ASSOCIATION
INCORPORATED

Ref: Number: N09000010637

We have received your document for FLORIDA SOUTHEAST REGIONAL SOCCER ASSOCIATION INCORPORATED and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Sylvia Gilbert
Regulatory Specialist II

Letter Number: 612A00000674

RECEIVED
12 JAN 20 AM 10:12
TALLAHASSEE, FLORIDA

SEE ATTACHED

01-12-12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF FLORIDA SOUTHEAST REGIONAL SOCCER ASSOC.
INC.

DOCUMENT NUMBER: N09000010637

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

Please return all correspondence concerning this matter to the following:

ARTHUR L. SUITE

(Name of Contact Person)

(Firm/Company)

1101 COLONY POINT BLVD 4 APT 411

(Address)

TEMBROKE PINES FL 33026

(City/State and Zip Code)

For further information concerning this matter, please call:

ARTHUR L. SUITE

(Name of Contact Person)

at (954) 437 9181

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input 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) |
|--|--|---|---|

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FILED
2012 JAN 20 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

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:
FLORIDA SOUTHEAST REGIONAL SOCCER ASSOCIATION INC.

SECOND: The document number of the corporation (if known): 11-03-09

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 12-29-11.

The number of directors in office was 3 and the vote for resolution was
3 for and 0 against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: 12-31-11
(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.)

ARTHUR L. SUITE

(Typed or printed name of the person signing)

CHAIRMAN / PRESIDENT

(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: FLORIDA SOUTHEAST REGIONAL SOCCER ASSOCIATION
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:

THERE WILL BE NO CLAIMS AS COMPANY NEVER OPERATED
HOWEVER ANY CLAIMS MUST HAVE THE NAME OF COMPANY
AND THE ADDRESS SHOWN HEREUNDER.


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

1101 COLONY POINT CIRCLE BLDG 4 APT 411

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.

ARTHUR L. SUITE

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