

N10000001861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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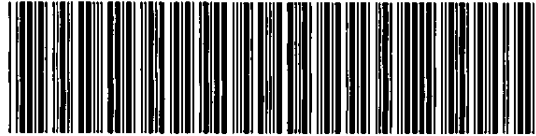
(Business Entity Name)

(Document Number)

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11 MAR 25 PM 12:21

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 MAR 25 PM 12:24

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RR
3/25/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: AMERICAN YOUTH HOMELESS INTERVENTION PROGRAM, INC

DOCUMENT NUMBER: N10000001861

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

Please return all correspondence concerning this matter to the following:

SAMUEL MILLS

(Name of Contact Person)

AMERICAN YOUTH HOMELESS INTERVENTION PROGRAM, INC

(Firm/Company)

7892 BROKEN OAK DR

(Address)

SMOKE FL 32460

(City/State and Zip Code)

For further information concerning this matter, please call:

SAMUEL MILLS

(Name of Contact Person)

at (850) 661-7322

(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

ARTICLES OF DISSOLUTION

FILED

Pursuant to section 617.1401, Florida Statutes, this Florida not for profit corporation has adopted the following Articles of Dissolution:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation as currently filed with the Florida Department of State:
AMERICAN YOUTH HOMELESS INTERVENTION PROGRAM, INC.

SECOND: The document number of the corporation (if known): 110000001861

THIRD: The file date of the articles of incorporation: 23 FEB 2010

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: Samuel Mills

(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)

SAMUEL MILLS

(Typed or printed name of person signing)

PRESIDENT / DIRECTOR

(Title of person signing)

Filing Fee: \$35