N/0000001973

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C.COULLIETTE

APR 2 6 2010

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Dissolution of Aragon 1	nstitute, Inc.
DOCUMENT NUMBER: N100000019	173
The enclosed Articles of Dissolution and fee are sub	mitted for filing.
Please return all correspondence concerning this mat	ter to the following:
Kathy Price (Name of Contact)	
(Name of Contact)	Person)
(Firm/Compan	y) ·
. 105 E. Desoto St.	
Pensacola, FL 3250 (City/State and Zip	
Pensacola, FL 325	
(City/State and Zip	Code)
For further information concerning this matter, please	e call:
(Name of Contact Person)	850) +34-3700
(Name of Contact Person)	(Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
(Ad	3.75 Filing Fee & Status & 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

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:
	Aragon Institute, Inc.
SECOND:	The document number of the corporation (if known): N 0000001973
THIRD:	The file date of the articles of incorporation: 2 25 10
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.
Signs	
	(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)
	Michelle R. MacNeil
	(Typed or printed name of person signing)
	President (Title of person signing)
	(Title of person signing)

Filing Fee: \$35