N10000005168

(Requestor's Name)	
(Address)	
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PICK-UP WAIT	MAIL
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(Document Number)	
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SECRETARY OF STATE

OCT - 9 2013 T. CARTER

COVER LETTER

Division of Corporations		
SUBJECT: Joseph C. Watts Family Center	r & Research Inst	itute, Inc.
DOCUMENT NUMBER: N1000000	5168	
The enclosed Articles of Dissolution and fee an	re submitted for fili	ng.
Please return all correspondence concerning this	s matter to the follo	owing:
Eshanda A. James		
·	ontact Person)	
Joseph C. Watts Family Ce		earch Institute, Inc.
7798 Mordecai Court	ompany)	
(Add	ress)	
Jacksonville, FL 32210		
(City/State ar	nd Zip Code)	
For further information concerning this matter,	please call:	
Eshanda A. James	at (904)	704-8399
(Name of Contact Person)	(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 Fe Certified Copy (Additional copy enclosed)	Certificate of Status &
MAILING ADDRESS:	STI	REET ADDRESS:

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



ARTICLES OF DISSOLUTION

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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:	
	Joseph C. Watts Family Center & Research Institute, Inc.	
SECOND:	The document number of the corporation (if known): N1000005168	
THIRD:	The file date of the articles of incorporation: 05/26/2010	
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: (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	Eshanda A. James	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35