

N10000000576

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR -5 AM 11:57

And Diss
@ 4.5.11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Corporation (Non Profit)

DOCUMENT NUMBER: 11-0000000176

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

Please return all correspondence concerning this matter to the following:

Violet Lawrence
(Name of Contact Person)

Caribhink Networks
(Firm/Company)

4524 Curry Ford Road #223
(Address)

Orlando FL 32812
(City/State and Zip Code)

For further information concerning this matter, please call:

Violet Lawrence at (407) 844-3407
(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 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

February 9, 2011

VIOLET LAWRENCE
INVISIBLE HANDS HELPING INC
4524 CURRY FORD ROAD #223
ORLANDO, FL 32812

SUBJECT: INVISIBLE HANDS HELPING INC.
Ref. Number: N10000005176

We have received your document for INVISIBLE HANDS HELPING INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 811A00003443



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2010

VIOLET LAWRENCE
INVISIBLE HANDS HELPING INC
4524 CURRY FORD ROAD #223
ORLANDO, FL 32812

SUBJECT: INVISIBLE HANDS HELPING INC.
Ref. Number: N10000005176

We have received your document for INVISIBLE HANDS HELPING INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 810A00028408

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:

Invisible Hands Helping Inc

SECOND: The document number of the corporation (if known): N0000005776

THIRD: The file date of the articles of incorporation: 5/26/10

FOURTH: The corporation has not commenced to conduct its affairs. NO

FIFTH: No debts of the corporation remains unpaid. none

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.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR -5 AM 11:57

Signature: Violet Lawrence

(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)

Violet Lawrence
(Typed or printed name of person signing)

Director
(Title of person signing)

Filing Fee: \$35