

N10000005445

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

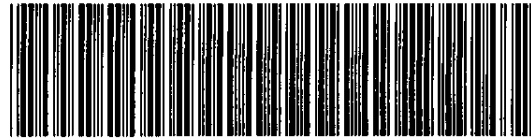
(Document Number)

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11 SEP 19 PM 12:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Th 9-15-11



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 7, 2011

ISABELLA PORCARO  
PALM BEACH ROLLERGIRLS  
1903 NE 2ND AVE  
DELRAY BEACH, FL 33444

SUBJECT: PALM BEACH ROLLERGIRLS, INC.  
Ref. Number: N10000005445

We have received your document for PALM BEACH ROLLERGIRLS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(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.

The current name of the entity is as referenced above. Please correct your document accordingly.

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) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 311A00020736

RECEIVED  
11 SEP 19 AM 8:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Palm Beach Rollergirls, TNC.

**DOCUMENT NUMBER:** N10000005445

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

Please return all correspondence concerning this matter to the following:

Isabella Porcaro

(Name of Contact Person)

Palm Beach Rollergirls

(Firm/Company)

1903 NE 2<sup>ND</sup> Ave

(Address)

Delray Beach, FL 33444

(City/State and Zip Code)

For further information concerning this matter, please call:

Isabella Porcaro

(Name of Contact Person)

at ( 561 ) 859-3063

(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)

\* already submitted

**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

FILED

11 SEP 19 PM 12:50

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:

Palm Beach Rollergirls, Inc.

SECOND: The document number of the corporation (if known): N16000005445

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

06/24/2011. 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 \_\_\_\_\_.

The number of directors in office was \_\_\_\_\_ and the vote for resolution was

\_\_\_\_\_ for and \_\_\_\_\_ against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: August 31<sup>st</sup>, 2011  
(no more than 90 days after dissolution file date)

Signature Isabella Porcaw  
(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.)

Isabella Porcaw  
(Typed or printed name of the person signing)

Treasurer  
(Title of person signing)

**FILING FEE: \$35**