

N100000006207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

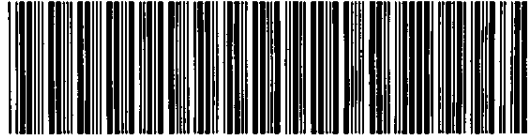
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1-6-15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tampa Immigration Law Center INC

DOCUMENT NUMBER: N10000006207

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

Please return all correspondence concerning this matter to the following:

Samson Koyonda Esq

(Name of Contact Person)

Tampa Immigration Law Center Inc

(Firm/Company)

2716 W Waters Ave

(Address)

Tampa FL 33614

(City/State and Zip Code)

For further information concerning this matter, please call:

Samson Koyonda Esq.

(Name of Contact Person)

at (813)

(Area Code)

443-0581

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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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:
Tampa Immigration Law Center

SECOND: The document number of the corporation (if known): N10000006207

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 meeting of members at which the resolution to dissolve was adopted

_____. 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 12/15/2014.

The number of directors in office was 2 and the vote for resolution was 2 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: 12/31/2014
(no more than 90 days after dissolution file date)

Signature: _____
(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)

Samson Koyonda Esq.

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

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Affidavit of Name Release

I Samson Koyonda Esq. President of Tampa Immigration Law Center Inc. hereby as part of the dissolution process relinquish claim to the name.

I am also the sole owner of the proposed Tampa Immigration Law Center LLC, whose articles of incorporation is herein included with this affidavit.

Sworn to this 22nd day of December 2014.


Samson Koyonda Esq.


Notary Public

