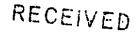
N10000009426

(Requestor's Name) (Address) (Address)	300375831323
(City/State/Zip/Phone #)	11/01/21610(8003 **43.75
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Office Use Only	FILED PRIZ HAR 29 PH 2: 04 WWW. SEPRIOR OF WWW. WWW. WWW. WWW. WWW. WWW. WWW. W

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FLORIDA DEPARTMENT OF STATE
Division of Corporations SECRETARY TALLAHASSEE, FL

November 16, 2021

MAHMOUD KAHEEL 1307 WEST NORTH B STREET TAMPA, FL 33606 US

SUBJECT: ISLAMIC SOCIETY OF SOUTH TAMPA, INC.

Ref. Number: N10000009426

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be adopted in one of the following manners:

If the corporation has members entitled to vote:

- (1) the date of the meeting of members at which the resolution to dissolve was adopted.
- (2) a statement that the number of votes cast for dissolution was sufficient for approval, OR
- (3) a statement that a resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

If the corporation has no members or members entitled to vote:

- (1) a statement that the corporation has no members or members entitled to vote on the dissolution.
- (2) the date of adoption of the resolution by the board of directors.
- (3) the number of directors then in office and the vote for the resolution.

The document must include a description of the information that must be included in a written claim. The description may include but not limited to who is filing the claim, the amount of the claim and a reason the claim is being filed.

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) 245-6050.

Jasmine N Horne Regulatory Specialist II

www.sunbiz.org

Letter Number: 821A00027855

COVER LETTER

Division of Corporations

SUBJECT:

Dissolution

N10000009426

DOCUMENT NUMBER:

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

Please return all correspondence concerning this matter to the following:

MAHMOUD KAHEEL

(Name of Contact Person)

ISLAMIC SOCIETY OF SOUTH TAMPA, INC.

(Address)
TAMPA, FL 33606 US

(City/State and Zip Code)

(Firm/Company)

For further information concerning this matter, please call:

Byron Longworth, Esq. 813 988-9898

at (______)

(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

☐\$35 Filing Fee ■ \$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee, Certificate of Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)

Mailing Address:

TO: Amendment Section

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

1307 WEST NORTH B STREET

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: ISLAMIC SOCIETY OF SOUTH TAMPA, INC		
SECOND:	The document number of the corporation (if known):		
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)		
	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 June 15, 2021	Ö	
	. The number of votes cast by the members was sufficient f approval.	or	
with	The resolution was adopted by written consent of the members and executed in accordan section 617.0701, Florida Statutes.	ice	
	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 and against. (Must be a majority vote)	_ for	
FOURTH	Effective date of dissolution, if applicable:	_	
	(no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
	Signature: / ill/ (Signature) (By the chairman of 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) MAHMOUD KAHEEL		
	(Typed or printed name of person signing)		
	Director		
	(Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

ISLAMIC SOCIETY OF SOUTH TAMPA, INC.

Name of Corporation:

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

Name, address, phone and e-mail of Person Submitting the Claim. All Claims should be forwarded to the last vegistered agent.

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1307 WEST NORTH B STREET

TAMPA, FL 33606 US

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

MAHMOUD KAHEEL

Printed Name of the Person Filing

Signature of the Person Filing