

N10000011176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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13 SEP -9 PM 3:19  
SECRETARY OF STATE  
09/14/13 4:35 PM

Valid.  
09/17/13  
DC

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** United States Veteran Assistance, Inc.

**DOCUMENT NUMBER:** N10000011176

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

Please return all correspondence concerning this matter to the following:

David E. Best

(Name of Contact Person)

(Firm/Company)

625 Lake Dot Cir. Ste. 204

(Address)

Orlando, FL 32801-1135

(City/State and Zip Code)

For further information concerning this matter, please call:

David E. Best

(Name of Contact Person)

at ( 407 )

250-4000

(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

## 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:  
United States Veteran Assistance, Inc.

SECOND: The document number of the corporation (if known): N10000011176

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

\_\_\_\_\_. 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 08/14/2013.

The number of directors in office was 3 and the vote for resolution was

3 for and 0 against. (must be a majority vote)

FILED  
13 SEP - 9 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOURTH: Effective date of dissolution if applicable: \_\_\_\_\_  
(no more than 90 days after dissolution file date)

Signature David E Best  
(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.)

David E. Best  
(Typed or printed name of the person signing)

President  
(Title of person signing)

**FILING FEE: \$35**