

N10000011752

(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
DIVISION OF CORPORATE AFFAIRS
15 APR 27 AM 8:59

C.L.
5-4-15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 16, 2015

JEANNE DEAUDE / LIVE OAK PARTNERSHIP, INC.
600 HELVENSTON STREET
LIVE OAK, FL 32064 US

SUBJECT: LIVE OAK PARTNERSHIP, INC
Ref. Number: N10000011752

We have received your document for LIVE OAK PARTNERSHIP, INC and your check(s) totaling \$52.50. 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.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis
Regulatory Specialist II

Letter Number: 915A00007621

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution

DOCUMENT NUMBER: N10000011752

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

Please return all correspondence concerning this matter to the following:

Jeanne d'Eauede
(Name of Contact Person)

LIVE OAK PARTNERSHIP
(Firm/Company)

600 HELVENSTON ST. S.E
(Address)

LIVE OAK FL 32064
(City/State and Zip Code)

For further information concerning this matter, please call:

Jeanne d'Eauede at (386) 590 1633
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input 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

ARTICLES OF DISSOLUTION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 APR 27 AM 8:59

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:
LIVE OAK PARTNERSHIP, INC.

SECOND: The document number of the corporation (if known): N10000011752

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

Feb. 10, 2015. 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 2.10.2015.

The number of directors in office was 3 and the vote for resolution was 3 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: _____
(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)

KATHERINE K. ALLEN

(Typed or printed name of person signing)

FORMER BOARD MEMBER

(Title of person signing)

Filing Fee: \$35

Notice of Corporate Dissolution

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

15 APR 27 AM 8:59

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.

Name of Corporation: Live Oak Partnership

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:

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

Jeanne D'Esposito
600 Helenston St SE
Live Oak, FL 32064

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.

Jeanne D'Esposito JEANNE D'ESPOSITO
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00