

N10807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

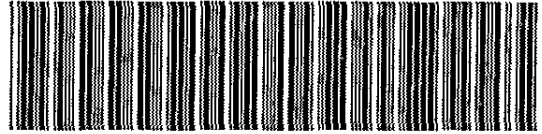
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/20/06--01060--008 \*\*43.75

FILED

06 SEP 20 PM 10:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE  
10/01/2006

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VOL DIS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Filing to Dissolve a NonProfit Corporation

**DOCUMENT NUMBER:** N10807

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

Please return all correspondence concerning this matter to the following:

Kim Jackson

(Name of Contact Person)

NET Employee's Service Club, Inc.

(Firm/Company)

P. O. Box 485 - 130 North 4th Street

(Address)

Macclenny, FL 32063

(City/State and Zip Code)

For further information concerning this matter, please call:

Kim Jackson

(Name of Contact Person)

at ( 904 ) 688-0024

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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:

NET Employee's Service Club, Inc.

SECOND: The document number of the corporation (if known): N10807

THIRD: Adoption of Dissolution  
(*Complete Section I or II*)

### SECTION I

**If the corporation has members entitled to vote:**

The date of the meeting of members at which the resolution to dissolve was adopted  
\_\_\_\_\_

(CHECK ONE)

- ☐ The number of votes cast for dissolution was sufficient for approval.
- ☐ The resolution was adopted by written consent and executed in accordance with 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 September 1, 2006.

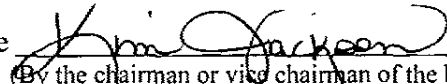
The number of directors in office was four (4) and the vote for resolution was  
four (4) for and none (0) against. (must be a majority vote)

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FOURTH: Effective date of dissolution if applicable: October 1, 2006  
(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.)

Kim Jackson

(Typed or printed name of the person signing)

Secretary

(Title of person signing)

**FILING FEE: \$35**

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