N1100000316

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Dissolution of Charity
DOCUMENT NUMBER: 1000000314
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pearl Price
Childhard Concer Crusaders Foundation Corporation
P.O. BOX)
Cypress, Florida 32432 (City/State and Zip Code)
For further information concerning this matter, please call: Comparison SSD SQD-2033
Enclosed is a check for the following amount: \$35 Filing Fee \$\Bigsquare \\$43.75 Filing Fee & \$\Bigsquare \\$43.75 Filing Fee & \$\Bigsquare \\$52.50 Filing Fee, \$\Bigsquare \\$Certificate of Status & \$\Bigsquare \\$Additional copy is enclosed)\$ 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: The name of the corporation as currently filed with the Florida Department of State: FIRST: SECOND: The document number of the corporation (if known): 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 _ The number of directors in office was ____ and the vote for resolution was

__ for and ___ against. (must be a majority vote)

FOURTH:	Effective date of dissolution if applicable:
	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.) (Typed or printed name of the person signing)
	CED Founder (Title of person signing)

FILING FEE: \$35