

N/1000000/899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

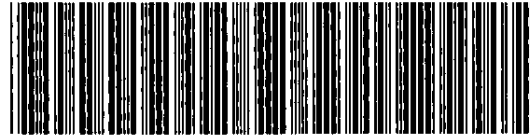
(Document Number)

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

Special Instructions to Filing Officer:

Counters document  
by filer can  
TR 9-5-12

Office Use Only



900238373719

09/05/12--01008--001 \*\*10.00

08/17/12--01016--014 \*\*25.00

VD/with mtr

FILED  
2012 SEP -4 PM 12:11  
CLERK OF COURT  
HALLAMSBURG, N.C.

SEP 05 2012  
T. ROBERTS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 21, 2012

JAMES EGGERS  
86040 HARRAH'S PLACE  
YULEE, FL 32097

SUBJECT: WESTBOUND MINISTRIES INC.  
Ref. Number: N11000001899

We have received your document for WESTBOUND MINISTRIES INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution for a nonprofit corporation must comply with either section 617.1401 or 617.1403, Florida Statutes.

It appears that you completed the wrong form.

We are enclosing the proper form(s) with instructions for your convenience.

The fee to file your document is \$35.

There is a balance due of \$10.00.

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.

Tina Roberts  
Regulatory Specialist II

Letter Number: 512A00021445

RECEIVED  
12 SEP -4 PM 12:38  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ARTICLES OF DISSOLUTION

**DOCUMENT NUMBER:** N11000001899

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

Please return all correspondence concerning this matter to the following:

JAMES EGBERS

(Name of Contact Person)

WESTBOUND MINISTRIES INC.

(Firm/Company)

8604D HARRAH'S PLACE

(Address)

YULEE, FLORIDA 32097

(City/State and Zip Code)

For further information concerning this matter, please call:

JAMES EGBERS

(Name of Contact Person)

at ( 832 ) 316-9605

(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)

\$25 PAID  
\$10 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

FILED

2012 SEP -4 PM 12:12

ARTICLES OF DISSOLUTION

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

WESTBOND MINISTRIES INC.

SECOND: The document number of the corporation (if known): 111000001899

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  
AUGUST 31<sup>ST</sup> 2012. 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.

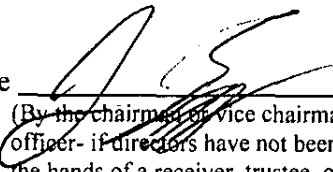
The date of adoption of the resolution by the board of directors was \_\_\_\_\_.

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: SEPTEMBER 15<sup>TH</sup> 2012  
(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.)

JAMES EGGERS

(Typed or printed name of the person signing)

PRESIDENT

(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.

Name of Corporation: WESTBOWN MINISTRIES INC.

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:

ALL DEBTS, OBLIGATIONS, AND LIABILITIES OF THE LLC  
HAVE BEEN PAID  
THE LLC DID NOT HAVE ANY INCOME TO REPORT AND DID  
NOT OPERATE AS A FUNCTIONAL COMPANY AT ANY TIME.  
THERE ARE NO LAW SUITS PENDING AGAINST THE COMPANY IN ANY COURT.

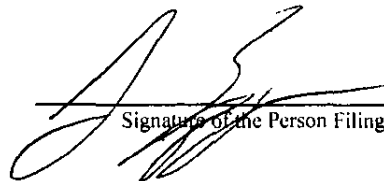
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

86040 HARRAH'S PLACE  
YULEE, FLORIDA, 32097  
\_\_\_\_\_  
\_\_\_\_\_

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.

JAMES EGGERS

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