

N11000008227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

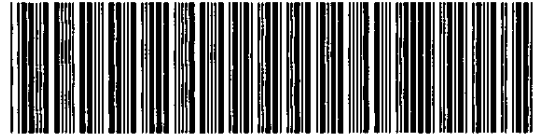
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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JUL 6 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Stanley's Academy of Excellence

DOCUMENT NUMBER: N11000008227

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

Please return all correspondence concerning this matter to the following:

Althea Stanley

(Name of Contact Person)

Stanley's Academy of Excellence

(Firm/Company)

3261 N.W. 65th Street

(Address)

Fort Lauderdale, FL. 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

Althea Stanley

(Name of Contact Person)

at (954) 242-8284

(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

STANLEY'S ACADEMY OF EXCELLENCE

Althea Stanley-Lee, President/Owner
3261 N.W. 65th Street, Fort Lauderdale, FL. 33309



Education is the Key to Success!

June 29, 2012

REFERENCE: Stanley's Academy of Excellence (N11000008227)

To whom it may concern;

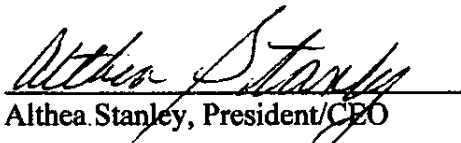
I filed my business, Stanley's Academy of Excellence, Inc. with the State of Florida as a Non-Profit organization in August of 2011. I am changing my business from Non-Profit to a Profit LLC.

Attached you will find the Application of Dissolution to dissolve, Stanley's Academy of Excellence, Inc. as a Non-Profit corporation. You will also find attached a letter of intent to not revoke the company's name: Stanley's Academy of Excellence, Inc. The fee of \$35.00 is attached in the form of a money order.

Attached you will also find the application to form Stanley's Academy of Excellence as a LLC. The fee of \$130.00 is attached in the form of a money order.

If you are in need of additional information, please contact me at (954) 242-8284.

Thank you,


Althea Stanley, President/CEO

Contact (954) 242-8284

Fax: (954) 977-0776

Email: stanleysacademy@yahoo.com

Web: www.stanleysacademy.com



ARTICLES OF DISSOLUTION

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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:
Stanley's Academy of Excellence, Inc.

SECOND: The document number of the corporation (if known): N11000008227

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 June 28, 2012.

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 Althea Stanley
(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.)

Althea Stanley
(Typed or printed name of the person signing)

President/CEO
(Title of person signing)

FILING FEE: \$35