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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Arheles 7 Dessolution		
DOCUMENT NUMBER: N11000010 043		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Kena Telpin		
AAC Hope Loundation Inc		
(Firm/Company)		
2000 Cross BREEZE DRIVE		
WElling 1011 4/334/4		
(City/State and Zip Code)		
For further information concerning this matter, please call: In Calley at (561) 385 9776 Operating Telephone Number)		
(Name of Contact Person) at (Set) (Daytime Telephone Number)		
Enclosed is a check for the following amount:		
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & 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

COVER LETTER

Division of Corporations		
SUBJECT: Articles 7 Desselution DOCUMENT NUMBER: N11000010 043		
DOCUMENT NUMBER: 11000010 040		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Rena Pelpin		
AAC Hope Loundation Inc		
2000 Cross BREEZE DRUE		
WEllingTon 4/33414		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (561) 385 9776 (Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount:		
□ \$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)		

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Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, 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:		
	A.H. C HOPE FOUNDATIONSINC		
SECOND:	The document number of the corporation (if known): 1/1/0000/0043		
THIRD:	The file date of the articles of incorporation: $\frac{10/25/2011}{}$		
FOURTH	The corporation has not commenced to conduct its affairs.		
FIFTH:	No debts of the corporation remains unpaid.		
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)		
	The dissolution was authorized by a majority of the directors: OR		
	☑ The dissolution was authorized by an incorporator.		
	The dissolution was authorized by a majority of the incorporators.		
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 person signing)		
	(Title of person signing)		

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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 optiona	al and is not required when filing a voluntary dissolution.
Name of Corporation: R.A.C. H&	pe Foundation anc
Date of dissolution will be the date the dissolution Articles of Dissolution.	is filed with the Department of State or as specified in the
Description of information that must be included in	n a claim:
Mailing address where claims can be sent: (Claim	s cannot be sent to the Division of Corporations)
A claim against the above named corporation will within 4 years after the filing of this notice.	be barred unless a proceeding to enforce the claim is commence
RENA Gilbin	Kenich
Printed Name of the Person Filing	Signature of the Person Filing