

N 1200000 Y699

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 11 2013

**T. ROBERTS**



**FLORIDA DEPARTMENT OF STATE**  
**Division of Corporations**

January 24, 2013

**GREGORY CHAMPION**  
**HEART-MANN INC**  
**838 N TEMPLE AVE**  
**STARKE, FL 32091**

**SUBJECT: HEART - MANN INC.**  
**Ref. Number: N12000004699**

We have received your document for HEART - MANN INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

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

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: 713A00001880

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FLORIDA  
DIVISION OF  
CORPORATIONS  
STATE

[www.sunbiz.org](http://www.sunbiz.org)

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Dissolution of a Not For Profit Corporation

**DOCUMENT NUMBER:** N12000004699

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

Please return all correspondence concerning this matter to the following:

Gregory Champion  
(Name of Contact Person)

HEART-MANN INC  
(Firm/Company)

838 N. Temple Ave  
(Address)

Stark Florida 32091  
(City/State and Zip Code)

For further information concerning this matter, please call:

Gregory Champion at (352) 423-4050  
(Name of Contact Person) (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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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:

HEART-MANW INC.

SECOND: The document number of the corporation (if known): N 12-000004699

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 01/04/13

The number of directors in office was 1 and the vote for resolution was

1 for and 0 against. (Must be a majority vote)

FOURTH: Effective date of dissolution if applicable: 01/24/13  
(no more than 90 days after dissolution file date)

Signature Gregory C Champion  
(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.)

Gregory Champion  
(Typed or printed name of the person signing)

President  
(Title of person signing)

**FILING FEE: \$35**