

N/13000005848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

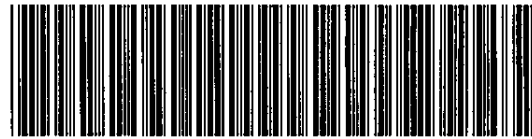
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800254588058

12/16/13--01046--003 **35.00

W/Notice
12-23-13
De

FILED
13 DEC 16 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Appraisers Coalition, Incorporated

DOCUMENT NUMBER: N13000005848

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

Please return all correspondence concerning this matter to the following:

Edward Scott Bales

(Name of Contact Person)

Edmund Scott Appraisals

(Firm/Company)

2021 Pebble Beach Rd

(Address)

Ocala, FL 34472

(City/State and Zip Code)

For further information concerning this matter, please call:

Ed Bales

(Name of Contact Person)

at (352)

(Area Code)

299-1593 call

(Daytime Telephone Number)

after 12 noon bet to recd

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

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:
Florida Appraisers Coalition, Incorporated
- SECOND: The document number of the corporation (if known): N13 000005848
- THIRD: The file date of the articles of incorporation: 6/24/13
- 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.

FILED
13 DEC 16 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Edward Scott Bates

(Typed or printed name of person signing)

Incorporator

(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: Florida Appraisers Coalition, Incorporated

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:

This not for profit corporation was never
used. I changed my mind?

ESB
Please close this corporation.

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

Edward Scott Bates
2021 Pebble Beach Rd
Ocala, FL 34472
352-299-1593

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.

Edward Scott Bates

Printed Name of the Person Filing

ESB

Signature of the Person Filing