

NB 000009214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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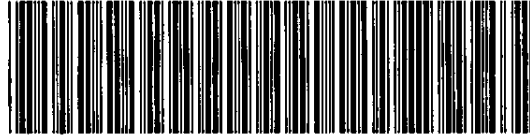
(Business Entity Name)

(Document Number)

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16 MAR -4 PM 4:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR - 8 2016

D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: the Mexico Beach, FL Community Garden

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

April Wisdom
(Name of Contact Person)

(Firm/Company)

411 Texas Drive
(Address)

Mexico Beach, FL 32456
(City/State and Zip Code)

For further information concerning this matter, please call:

April Wisdom at (850) 227-8920
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 4, 2016

APRIL WISDOM
411 TEXAS DRIVE
MEXICO BEACH, FL 32456

SUBJECT: THE MEXICO BEACH, FLORIDA COMMUNITY GARDEN
CORPORATION
Ref. Number: N13000009214

We have received your document for THE MEXICO BEACH, FLORIDA COMMUNITY GARDEN CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE MEXICO BEACH FLORIDA COMMUNITY GARDEN CORP. IS AN ACTIVE COMPANY. A REVOCATION OF DISSOLUTION IS NOT NEEDED.

The attached form must be completed in order to file the document.

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.

Cathy A Carrothers
Regulatory Specialist

Letter Number: 616A00002405

RECEIVED
16 MAR -4 PM 1:44

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:

The Mexico Beach A Community Garden

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

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 meeting of members at which the resolution to dissolve was adopted

(NO) 1 Oct 2015. 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 1 Oct 2015.

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: 15 Oct 2015
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

April Wisdom
(Typed or printed name of person signing)

Director
(Title of person signing)

Filing Fee: \$35