

N140000007932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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16 NOV - 1 PM 12:13  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

NOV 02 2016  
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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cultural Alliance of Marco Island and Goodland

**DOCUMENT NUMBER:** N14000007932

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

Please return all correspondence concerning this matter to the following:

Hyla Crane

(Name of Contact Person)

Cultural Alliance of Marco Island and Goodland c/o Marco Island Center for the Arts

(Firm/Company)

1010 Winterberry Dr.

(Address)

Marco Island, FL 34145

(City/State and Zip Code)

For further information concerning this matter, please call:

Hyla Crane

(Name of Contact Person)

at ( 239 )

(Area Code)

394-4221

(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

STATE OF FLORIDA  
DIVISION OF CORPORATIONS  
16 NOV - 1 PM 12:13

## 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:

Cultural Alliance of Marco Island and Goodland

SECOND: The document number of the corporation (if known): N14000007932

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

\_\_\_\_\_. 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 \_\_\_\_\_.

The number of directors in office was <sup>5</sup>\_\_\_\_\_ and the vote for resolution was <sup>5</sup>\_\_\_\_\_ 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)

**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)

Hyla Crane

\_\_\_\_\_  
(Typed or printed name of person signing)

Secretary

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35**

16 NOV - 1 PM 12:13  
STATE DEPT OF STATE  
DIVISION OF CORPORATIONS

## ***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:* Cultural Alliance of Marco Island and Goodland

*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:*

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

Cultural Alliance of Marco Island and Goodland c/o Marco Island Center for the Arts

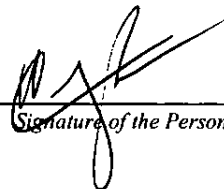
1010 Winterberry Drive

Marco Island, FL 34145

*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.*

Hyla Crane

*Printed Name of the Person Filing*

  
*Signature of the Person Filing*

***Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00***

## **ARTICLE XII DISSOLUTION**

In the event of the liquidation or dissolution of CAMIG, whether voluntary or involuntary, no officer or director shall be entitled to any distribution or division of CAMIG's remaining property or its proceeds, and the balance of all money and other property received by CAMIG from any source, after payment of all debts and obligations of the CAMIG shall be distributed to such non-profit, charitable, scientific, literary, or education organization as described in Section 501 (c ) (3) of the Internal Revenue Code of 1986 (or any successor provision of law), as shall be best able to promote the mission of CAMIG, subject to any donor-imposed or Board-imposed restrictions on any assets of CAMIG.