N14000010544

(Requ	uestor's Name)	
(Addı	ress)	
(Addı	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



000286689110

06/14/16--01023--008 **43.75

FILED ANIO: 13
SECRETARY OF STATE

Alkan to 300 3

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Meadow Woods Elementary School PTO
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Maria Santiago (Name of Contact Person)
(Name of Contact Person) Meadow Woods Flementary Schwi PTO (Firm/Company)
(Firm/Company) 1. 500 Rhode Island Woods Circle
Orlando Florida 32824
(City/State and Zip Code)
For further information concerning this matter, please call: Month Words Elementary at (407) 858-3140 (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 Certificate of Status 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



June 20, 2016

MARIA SANTIAGO 500 RHODE ISLAND WOODS CIRCLE ORLANDO, FL 32824

SUBJECT: MEADOW WOODS ELEMENTARY SCHOOL PTA

Ref. Number: W16000043953

We have received your document for MEADOW WOODS ELEMENTARY SCHOOL PTA and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

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.

Letter Number: 516A00012880

Carol Mustain Regulatory Specialist II

www.sunbiz.org

August 16, 2016

Florida Department of State Division of Corporations

Attn: Ms. Carol Mustain, Regulatory Specialist II

Subject: Meadow Woods PTO, INC Ref. Number: W16000043953

Dear Ms. Mustain:

Per our conversation and your instructions, I am attaching with this letter, Articles of Dissolution for Meadow Woods PTO, Inc. Document number N14000010544.

Thank you very much for your assistance in this matter.

Cordially,

Maria Santiago

ARTICLES OF DISSOLUTION

Pursuant to Articles of I	section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Assolution:
FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	Meadow Woods PTO, Inc.
SECOND:	The document number of the corporation (if known): NIU 00010 544
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 =
	Way 24, 2016. 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 and the vote for resolution was for and against. (Must be a majority vote)
FOURȚH	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: Working The State 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)
	<u>Hana Santiago</u>
	(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35