

N15000002527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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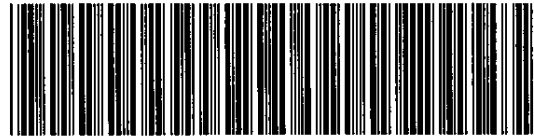
(Business Entity Name)

(Document Number)

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2016 AUG 11 2:51 PM  
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TALLAHASSEE, FLORIDA

FILED

AUG 11 2016

C. CARROTHERS

**HOT ROD FLAMES INC.**  
**222 Lakeview Avenue, Suite 910**  
**West Palm Beach, FL 33401**

July 27, 2016

Florida Division of Corporations  
Amendment Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Re: HOT ROD FLAMES INC.**  
**Document No. N15000002527**  
**Articles of Dissolution**

Dear Madam/Sir:

Enclosed please find the original signed Articles of Dissolution for the above referenced Florida Non-Profit Corporation. Also enclosed please find a check made payable to the Florida Department of State in the amount of \$35.00 for your fee in connection with filing these Articles of Dissolution.

I have enclosed a copy of the Articles of Dissolution. Please file the original and return the copy to my office stamped "received" in the provided return stamped envelope.

Thank you.

Sincerely yours,



JOHN W. RANDOLPH, JR.

JWRjr/msg  
enclosures

## 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:

**HOT ROD FLAMES INC.**

SECOND: The document number of the corporation (if known): **N15000002527**

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 **7/22/2016**

The number of directors in office was **3** and the vote for resolution was **3** 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)

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)

**John W. Randolph, Jr.**

(Typed or printed name of person signing)

**President**

(Title of person signing)

**Filing Fee: \$35**

FILED  
2016 AUG -2 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA