N16093

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COVER LETTER

TO: Amendment Section

Division of Corporations

SUBJECT: Dissolution of Accoskne Threshold Foundam		
DOCUMENT NUMBER: N 16093		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerni	ng this matter to the following:	
FELIX L. SAMBOGNA		
(Nam	e of Contact Person)	
Mc Cosichie THRES HOLD FOUNDATION		
	Firm/Company)	
PO BCX 7		
(Address)		
MARY ESTHER, FL 32569		
(City/State and Zip Code)		
For further information concerning this m	atter, please call:	
FRIX L. SAMBOENA	at (<u>850</u>) <u>862 - 7583</u>	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status	\$43.75 Filing Fee & \$\$52.50 Filing Fee, Certificate of Certified Copy Status & Certified Copy Additional copy is enclosed) (Additional copy is enclosed)	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32303	

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Mc COSKRIE THRESHOLD FOUNDER TON The document number of the corporation (if known): N 16093 SECOND: 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 TWLY 10 The number of directors in office was ____ and the vote for resolution was _ and 1 ____ against. (Must be a majority vote) Effective date of dissolution, if applicable: December 4, 2620, OF. Scorfer (no more than 90 days after dissolution file date) FOURTH 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: Felin L. Scalin (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) (Typed or printed name of person signing)

Filing Fee: \$35

Sechetory MTF
(Title of person signing)