N17000000548

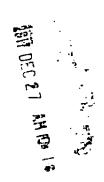
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Submess Entry Hame)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200306979892

12/27/17--01017--012 **55.00



DEC 2 9 2017 C MCNAIR

COVER LETTER

THOSE STATES TO: Amendment Section Division of Corporations SUBJECT: Kingdom of Christ Ministries, Inc. DOCUMENT NUMBER: <u>\$\int 17000000548</u> The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Rev. Keith A. Schweikert
(Name of Contact Porson Kingdom of Christ Ministries, Inc.
(Firm/Company) 8500 Belcher Rd N Apt. 705 FL 33781-1011 (City/State and Zip Code) For further information concerning this matter, please call: Rev. Keith A. Schweikert at (727) 637-2883
(Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \Bigcup \$43.75 Filing Fee & \Bigcup \$52.50 Filing Fee,

Certificate of Status Certified Copy Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is

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

enclosed)

certified mail # 7016 3560 0000 6484 5928

ARTICLES OF DISSOLUTION

Pursuant to section 617.7403, 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: Kingdom of Christ Ministries, Inc. THE DECE THE PARTY OF The document number of the corporation (if known): N1700000548SECOND: 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 $\frac{12/18/12}{}$ The number of directors in office was three and the vote for resolution was three for and <u>zero</u> against. (Must be a majority vote) Effective date of dissolution, if applicable: 1/159 m. 12/3/12 (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. Della 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) Christine M. Costella
(Typed or printed name of person signing)

Assistant Secretary
(Title of person signing)

Filing Fee: \$35