

N 170000032515

Schmidt
5113 Sharon Terr.
JAX FL 32207

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



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(Business Entity Name)

(Document Number)

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JACKSONVILLE, FLORIDA

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35-4

March 24, 2017

To: Amendment Section
Division of Corporations
P.O Box 6327
Tallahassee, FL 32314

From: All 4 Jesus Inc
5113 Sharon Terrace
Jacksonville FL 32207
(904)226-0997

RE: Doc # N17000002515- All 4 Jesus Inc

To Whom It May Concern:

On March 8, 2017 I incorporated my new business "All 4 Jesus Inc" online as a not for profit corporation **by error**. This company is going to make a profit and I'd like to correct this mistake by dissolving the Non-Profit Corporation and Incorporating the For Profit Corporation using the same business name. I am seeking your permission to use the same name "All 4 Jesus Inc".

We do not intend to revoke the dissolution of the non-profit & start the new business with the same name.

Enclosed you will find my dissolution of the corporation & the Articles of Incorporation, as well as my new business entity paperwork with all of the applicable fees.

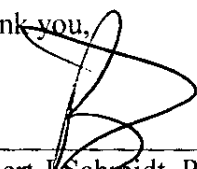
Unfortunately I realized this error after the fact and in order to correct my mistake I called in & spoke to your amendment department to make sure I was following all the proper channels.

Please assist me in order to get this corrected and on track- for me to start my company as I had intended before April 7, 2017.

I appreciate your help in this matter.

If you have any questions, please call me at (904)226-0997.

Thank you,


Robert J. Schmidt, Pres

RECEIVED
17 MAR 28 PM 1:51
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL 4 JESUS INC

DOCUMENT NUMBER: N17000002515

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

Please return all correspondence concerning this matter to the following:

ROBERT J SCHMIDT

(Name of Contact Person)

ALL 4 JESUS INC

(Firm/Company)

5113 SHARON TERRACE

(Address)

JACKSONVILLE FL 32207

(City/State and Zip Code)

For further information concerning this matter, please call:

ROBERT J SCHMIDT at (**904**) **226-0997**

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

ARTICLES OF DISSOLUTION

Pursuant to section 617.1401, 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:

ALL 4 JESUS INC

SECOND: The document number of the corporation (if known): **N17000002515**

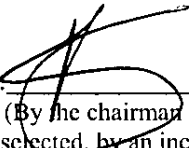
THIRD: The file date of the articles of incorporation: **03/08/2017**

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**
(Note: Cannot be authorized by an incorporator if the corporation has directors)

- ☐ The dissolution was authorized by a majority of the directors:
OR
- ☒ The dissolution was authorized by an incorporator.
- ☐ The dissolution was authorized by a majority of the incorporators.

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)

ROBERT J SCHMIDT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35

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OF FLORIDA