Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000285688 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

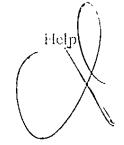
Account Name : CHISHOLM LAW FIRM, PLLC

Account Number : 120220000066 : (407)674-2657 Fax Number : (888)545-5919

## DISSOLUTION OR WITHDRAWAL MAKEESHA L. ALLEN MINISTRIES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu — Corporate Filing Menu



## **COVER LETTER**

TO: Amendment Section Division of Corporations		
MAKEESHA L. ALLEN MINE SUBJECT:		
N170000083	339	
DOCUMENT NUMBER:	<del>.</del>	
The enclosed Articles of Dissolution a	and fee are submitted for filing.	
Please return all correspondence concer	rning this matter to the following:	
Breanna McCarthy		
Chisholm Law Firm, PLLC	ame of Contact Person)	2023 AUS SECREDA
37 N Orange Ave., Suite 500	(Firm/Company)	HAS
Orlando, Florida 32801	(Address)	SEE, FL
(Ci	ty/State and Zip Code)	<u> </u>
For further information concerning this Breama McCarthy	407 674-2657	
(Name of Contact Person)	(Area Code) (Daytime Teleph	none Number)
Enclosed is a check for the following an	mount:	
Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee, Certified Copy  (Additional copy is enclosed)  Certified Copy (Additional copy is enclosed)	<b>∮</b>
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	ite 810

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403. Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST	MAKEESHA L. ALLEN MINISTRIES, INC.	
SECOND:	N17000008339 The document number of the corporation (if known):	
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	20
	The number of votes east by the members was suffice approval.	2023gni for
with	☐ The resolution was adopted by written consent of the members and executed areas	ordance
	The resolution was adopted by written consent of the members and executed racconsection 617.0701. Florida Statutes.	<b>1</b>
	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 August 9, 2023	·
	The number of directors in office was $\frac{2}{2}$ and the vote for resolution was $\frac{2}{2}$ and $\frac{NOT}{2}$ against. (Must be a majority vote)	for
FOURTH	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 listed as the document's effective date on the Department of State's records.	ate will not
	Signature:	
	(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)  Makeesha Allen	by an
	(Typed or printed name of person signing) President	
	(Title of person signing)	

Filing Fee: \$35

## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. MAKEESHA L. ALLEN MINISTRIES, INC. Name of Corporation.\_ Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution. Description of information that must be included in a claim: Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) 7455 France Ave S Suite 416, Edma, MN 55435 A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice. Makeesha Allen

Signature of the Person Filing

Printed Name of the Person Filing