

N17198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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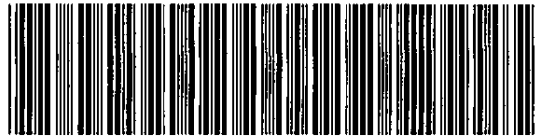
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA  
09 AUG 25 PM 1:05

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Tallahassee Area Convention and Visitors Bureau

**DOCUMENT NUMBER:** N17198

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

Please return all correspondence concerning this matter to the following:

Stephanie Reaves

(Name of Contact Person)

Tallahassee Area Convention & Visitors Bureau

(Firm/Company)

106 E. Jefferson Street

(Address)

Tallahassee, FL 32301

(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie Reaves

(Name of Contact Person)

at ( 850 ) 606-2305

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee    ☐ \$43.75 Filing Fee & Certificate of Status    ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)    ☒ \$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 617.1403, 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:  
Tallahassee Area Convention & Visitors Bureau

SECOND: The document number of the corporation (if known): N17198

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 the 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 June 16, 2009

The number of directors in office was 17 and the vote for resolution was

11 for and 6 against. (must be a majority vote)

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FOURTH: Effective date of dissolution if applicable: September 30, 2009  
(no more than 90 days after dissolution file date)

Signature Michelle Personette  
(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.)

Michelle Personette

(Typed or printed name of the person signing)

Board Chair / OFFICER

(Title of person signing)

**FILING FEE: \$35**