

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H18000205705 3)))



H180002057053ABC

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 : TRIAD PROFESSIONAL SERVICES
 Account Number : I20160000008
 Phone : (850) 777-2091
 Fax Number : (770) 220-1943

S TALLENT

JUL 17 2018

DISSOLUTION OR WITHDRAWAL
BEAUVAIS AT CHEVAL NEIGHBORHOOD ASSOCIATION,
INC.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

RECEIVED
 18 JUL 16 AM 11:58
 SECRETARY OF STATE
 TALLAHASSEE, FL 32399

U/D

Electronic Filing Menu

Corporate Filing Menu

Help

850-617-6381

7/16/2018 11:45:27 AM PAGE 1/001 Fax Server



July 16, 2018

FLORIDA DEPARTMENT OF STATE

BEAUVAIS AT CHEVAL NEIGHBORHOOD ASSOCIATION, INC.
3922 COCONUT PALM DR., STE. 108
TAMPA, FL 33619

SUBJECT: BEAUVAIS AT CHEVAL NEIGHBORHOOD ASSOCIATION, INC.
REF: N18000005648

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent
Regulatory Specialist II

FAX Aud. #: H18000203883
Letter Number: 818A00014547

RECEIVED
18 JUL 16 AM 11:58
SECRETARY OF STATE
TALLAHASSEE, FL

P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Beauvais at Cheval Neighborhood Association, Inc.

DOCUMENT NUMBER: N18000005648

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

Please return all correspondence concerning this matter to the following:

Sharon K. Gray

(Name of Contact Person)

Triad Professional Services

(Firm/Company)

1720 Windward Concourse, Ste. 390

(Address)

Alpharetta, GA 30005

(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon K. Gray

(Name of Contact Person)

at

770

(Area Code)

777-2091

(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

((H18000203883 3)))

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:
Beauvais at Cheval Neighborhood Association, Inc.

SECOND: The document number of the corporation (if known): **N18000005648**

THIRD: The file date of the articles of incorporation: **05/21/2018**

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)

Carlos De La Ossa

(Typed or printed name of person signing)

Vice President & Treasurer

(Title of person signing)

Filing Fee: \$35

(((H18000203883 3)))

FILED
18 JUL 15 AM 9:29