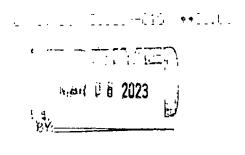
## N1800011883

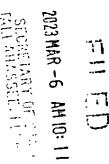
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
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(Document Number)
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900403760079







## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT:	RGANIZATION, INC	· · · · · · · · · · · · · · · · · · ·
DOCUMENT NUMBER: N18000011883		
The enclosed Articles of Dissolution and fee	e are submitted for	filing.
Please return all correspondence concerning to	this matter to the fo	ollowing:
Sheila K. Maye		
(Name of	Contact Person)	
(Firm	n/Company)	
3715 Hidden Oak Dr.		
(A	Address)	
Pensacola, FL 32504		
(City/State	e and Zip Code)	
For further information concerning this matte	er, please call:	
Sheila Kay Maye	at ( 850	982-5322
(Name of Contact Person)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount	t:	
		52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Division	Idress: nent Section n of Corporations ntre of Tallahassee
Tallahassee, FL 32314		Monroe Street, Suite 810 ssee, FL 32303

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST:

	JABYN'S HAVEN CHARITABLE ORGANIZATION, INC.				
SECOND:	The document number of the corporation (if known): N18000011883				
THIRD:	Adoption of Dissolution (COMPLETE SECTION I OR II)				
		ĭ] ==			
	(CHECK/COMPLETE ONE)				
	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				
	The number of directors in office was3 and the vote for resolution was3 and0 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 will not be listed as the document's effective date on the Department of State's records.	iot			
	Signature:  (By the chairman or vice chairman of the board, president or other efficer- 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)				
	Sheila K. Maye				
	(Typed or printed name of person signing)				
	President				

Filing Fee: \$35

(Title of person signing)