## N19094

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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SECRETARY OF STATE
TAIL AHASSEE, FLORIDA

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Consumer Credit Couns	eling of Mid-Florida, Inc.
DOCUMENT NUMBER: N19094	
The enclosed Articles of Dissolution and fee are submitt	ed for filing.
Please return all correspondence concerning this matter to	o the following:
Tamika Bryant Cromer	
(Name of Contact Perso	on)
C/O GreenPath, Inc.	
(Firm/Company)	
38505 Country Club Drive, Suite 210	•
(Address)	
Farmington Hills, MI 48334	
(City/State and Zip Code	e)
For further information concerning this matter, please cal	11:
Tamika Bryant Cromer at ( 248	3 , 488-0220
(Name of Contact Person)	Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
	ed Copy Certificate of Status & Certified Copy
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



April 21, 2010

Tamika Bryant Cromer c/o GreenPath, Inc. 38505 Country Club Drive, Suite 210 Farmington Hills, MI 48334

SUBJECT: CONSUMER CREDIT COUNSELING SERVICE OF MID-FLORIDA,

INC.

Ref. Number: N19094

We have received your document for CONSUMER CREDIT COUNSELING SERVICE OF MID-FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

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) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 810A00009905



38505 Country Club Dr. Suite 210 Farmington Hills, MI 48331-3429 (248) 553-5400 Fax (248) 553-8970 www.greenpath.com

April 30, 2010

Florida Department of State Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Articles of Dissolution for Consumer Credit Counseling Service of Mid-Florida

To Whom It May Concern:

Enclosed please find Articles of Dissolution and a Notice of Corporate Dissolution for the above referenced entity with original signatures. Please file the Articles and Notice of dissolution in your normal manner.

Should you have any questions, please do not hesitate to contact me.

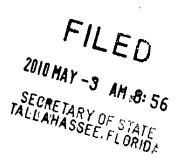
Sincerely,

GreenPath, Inc.

Tamika A. Bryant Gromer, Es

Manager of Compliance and Legal Affairs

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## 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: Consumer Credit Counseling Service of Mid-Florida, Inc. The document number of the corporation (if known): N19094 SECOND: 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 The number of directors in office was\_\_\_\_\_ and the vote for resolution was

for and against. (must be a majority vote)

FOURTH: Effective date of dissolution if applicable: immediately

(no more than 90 days after dissolution file date)

Signature

(By the chairman of 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.)

Richard Tuman

(Typed or printed name of the person signing)

**President** 

(Title of person signing)

**FILING FEE: \$35** 

## NOTICE OF CORPORATE DISSOLUTION

This notice is submitted by the dissolved not for profit corporation named below for resolution of payment of unknown claims against this not for profit corporation as provided in section 617.1407, F.S.

Name of Corporation: Consumer Credit Counseling Service of Mid-Florida, Inc.

The 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:

- Name, address, telephone number and facsimile numbers of claimant.
- Name, address, telephone number and email address of contact person for the claimant.
- A detailed description of the circumstances giving rise to the claim.
- Any and all supporting documentation for the claim (i.e. copies of contracts and invoices.
- The total dollar amount of the claim along with an explanation of the computation of the amount.

Claims should be mailed to the following address: Consumer Credit Counseling Service of Mid-Florida, c/o GreenPath, Inc. – Attention: Tamika Bryant Cromer, 38505 Country Club Drive, Farmington Hills, MI 48331.

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.

Richard Tuman Printed Name

Dated: February 22 2010

Signature Juman