## NZO 000006468

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## COVER LETTER

Riches 2 Enrich, Inc. SUBJECT: \_\_\_\_ N20000006468 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Judith Knopf (Name of Contact Person) (Firm/Company) 301 Trieste Drive (Address) Palm Beach Gardens, Florida 33418 (City/State and Zip Code) For further information concerning this matter, please call: Judith Knopf (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: ■ \$35 Filing Fee □ \$43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Certificate of Status Certified Copy Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)

Mailing Address:

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

TO: Amendment Section

Division of Corporations

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## 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 Sta Riches2Enrich, Inc	ite:
SECOND:	N20000006468 The document number of the corporation (if known):	
THIRD:	The file date of the articles of incorporation:	
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)	282
	■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.	77 H 3 .
J	(By the chairman or vice chairman of the board, president or other officer- if directors have no an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	 or been
	Judith Knopf	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

Filing Fee: \$35