

N22 000000 3 P1

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

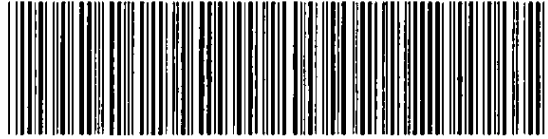
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
AUG - 9 2023

Office Use Only



100410816121

06/23/23--01021--014 **35.00

FILED
23 JUN 23 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of Non Profit

DOCUMENT NUMBER: N22000003771

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

Please return all correspondence concerning this matter to the following:

JEFF EDWARDS
(Name of Contact Person)

US INVESTING GROUP, LLC
(Firm/Company)

12220 SPRINGMOOR THREE COURT
(Address)

JAX FL 32225
(City/State and Zip Code)

For further information concerning this matter, please call:

JEFF EDWARDS at (904) 234-4957
(Name of Contact Person) (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
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 State

HARMONY RECOVERY Housing Corp

SECOND: The document number of the corporation (if known): N 22 000003791

THIRD: The file date of the articles of incorporation: 04/05/22

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)

JEFFREY EDWARDS

(Typed or printed name of person signing)

SECRET

(Title of person signing)

Filing Fee: \$35

FILED
23 JUN 23 PM 2:15
CLERK OF STATE
TALLAHASSEE, FLORIDA

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: HARMONY RECOVERY HOUSING

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:

DISSOLUTION EFFECTIVE 04/30/2023

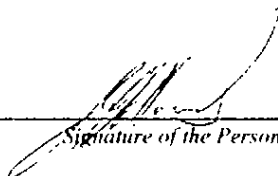
I AM THE OWNER of this Non Profit Corporation AND
RELEASE THE NAME FOR THE PURPOSE of FORMING
HARMONY RECOVERY HOUSING, LLC

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1015 ATLANTIC BLVD #71
ATLANTIC BEACH, FL 32233

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.

JEFF EDWARDS
Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00