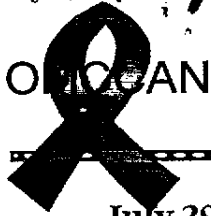


N23648



OCCUPAN

Ocala/Marion County Community AIDS Network

1012 E. Silver Springs Blvd.

Suite E

Ocala, FL 34470

(352) ~~424-5044~~ Fax (352) ~~629-5124~~

352-629-5124

July 29, 1999

Florida Department of State
Division of Corporations

FILED
99 AUG 18 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom It May Concern:

This is our notice of intent to dissolve our non-profit corporation
and cancel our status. You may use my P.O. Box 6936, Ocala, FL
34478 for any final mailing.

Sincerely yours

Dennis McMaster
Office Administrator

500002948655--7
-08/03/99--01032--007
*****35.00 *****35.00

Voldis

V. SHEPARD AUG 20 1999

Education - HIV/AIDS Classes - Client Services - Referral - Support Groups
Speakers Bureau
"A United Way Agency"



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

August 10, 1999

DENNIS MCMASTER
OCALA-MARION CNTY. COMMUNITY AIDS NETWORK
1012 E. SILVER SPRINGS BLVD., STE. E
OCALA, FL 34470

SUBJECT: OCALA-MARION COUNTY COMMUNITY AIDS NETWORK, INC.
Ref. Number: N23648

We have received your document for OCALA-MARION COUNTY COMMUNITY AIDS NETWORK, 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 be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 487-6909.

Velma Shepard
Corporate Specialist

Letter Number: 199A00040439

RECEIVED
99 AUG 18 PM 12:58
DIVISION OF CORPORATIONS

FILED
99 AUG 18 PM 2:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 is OCALA-MARION COUNTY COMMUNITY AIDS NETWORK, INC
SECOND: Adoption of dissolution
(Complete Section I or II)

SECTION I

If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted was

JULY 19, 1999

(CHECK ONE)

- ☒ The number of votes cast for dissolution was sufficient for approval.
- ☐ The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members with voting rights:

The corporation has no members or members with voting rights.

The date of adoption of the resolution by the board of directors was _____

The number of directors in office was _____ and the vote for the resolution was _____ for and _____ against.

Signed this 30 day of JULY, 1999

Signature ~~Dennis McMaster~~ - Peter L. Medina V.P.
(By the Chairman or Vice Chairman of the Board, President or other officer)

DENNIS McMASTER Peter L. Medina
Typed or printed name
OFFICE ADMINISTRATOR V.P.
Title