

Division of Corporations

Page 1 of 2

N/27698

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H00000060820 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 922-4000

From:

Account Name : JIM KENT & COMPANY
Account Number : I19990000128
Phone : (305) 220-8477
Fax Number : (305) 220-8639

RECEIVED
00 DEC -1 AM 10:17
DIVISION OF CORPORATIONS

FILED
00 DEC -1 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DISSOLUTION

CORAL GABLES ORCHID SOCIETY, INC.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$43.75

VOID
REC
12/1
11/20/00

Dec 01 00 09:45a JIM KENT
11/30/00 17:14 Fl Dept of State

305-220-8639
p1 /1

p.2



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

November 30, 2000

CORAL GABLES ORCHID SOCIETY, INC.
P O BOX 56-0092
MIAMI, FL 33256-7092

SUBJECT: CORAL GABLES ORCHID SOCIETY, INC.
REF: N27698

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please check the appropriate box in SECTION I

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) 487-6901.

Susan Payne
Senior Section Administrator

FAX Aud. #: H00000060820
Letter Number: 600A00060903

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

(((H00000060820 8)))

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 Coral Gables Orchid Society, 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
September 22, 2000.

(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 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 _____ day of _____

Signature

Sandra L. Schultz

(By the Chairman or Vice Chairman of the Board, President or other officer)

SANDRA L. SCHULTZ

Typed or printed name

President

Title

(((H00000060820 8)))

FILED
00 DEC -1 PM 1:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA