Requestor's Name City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. (Corporation Name) (Document #) 2. (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Pick up time Walk in Certified Copy Photocopy ☐ Will wait J Mail out Certificate of Status NEW FILINGS AMENDMENTS Profit Amendment NonProfit Resignation of R.A., Officer/ Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Метдет REGISTRATION/ QUALIFICATION OTHER FILINGS Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials 5-31-97

SouthTrust Bank



May 14, 1997

Florida Department of State Division of Corporations P O Box 6327 Tallahassee, Fl 32314

The Silver Springs Shores Chamber of Commerce has voted to dissolve.

I have filled out the form and included check $\sharp 1846$ for the $\sharp 35.00$ filing fee for the dissolution.

If you need to contact me please call me at SouthTrust Bank at 352 687 1300 or write me at : SouthTrust Bank 9268 Maricamp Rd Ocala, Fl 34472

Sincerely

Martha Perry

Martha Perry

Treasurer

Silver Springs Shores Chamber of Commerce

Ocala, FL 34472

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida nonprofit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is Silver Springs Shores Chamber of Commerce, 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 resolation st dissolve was adopted was March 27, 1997 (CHECK ONE) The number of votes cast for dissolution was sufficial 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 14th day of May, 1997

Signature // Work Chairman of the Board, (By the Chairman or Vice Chairman of the Board, President or other officer) Treasurer

Typed or printed name

Title

Martha Perry

Treasurer