

# N35275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

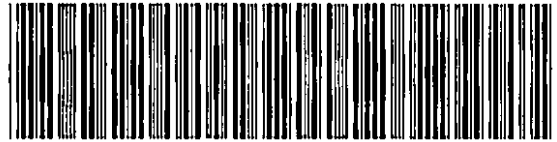
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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12/21/18--01607--014 \*\*09.11

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18 DEC 21 PM 4:35  
TALLAHASSEE, FLORIDA

JAN 05 2019

S. YOUNG

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ESM ASSOCIATION OF CENTRAL FLORIDA, INC.

**DOCUMENT NUMBER:** N 35275

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

Please return all correspondence concerning this matter to the following:

RICHARD MERGO

(Name of Contact Person)

ESM ASSOCIATION OF CENTRAL FLORIDA, INC.

(Firm/Company)

PO BOX 593844

(Address)

ORLANDO, FL 32859

(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD MERGO

(Name of Contact Person)

at ( 407 )

(Area Code)

256-8714

(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## 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:

ESM ASSOCIATION OF CENTRAL FLORIDA, INC.

SECOND: The document number of the corporation (if known): N 35275

THIRD: The file date of the articles of incorporation: 12/18/2018

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.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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)

RICHARD MERO

(Typed or printed name of person signing)

TREASURER

(Title of person signing)

Filing Fee: \$35

## 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: ESM ASSOCIATION OF CENTRAL FLORIDA, INC.

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:

N/A

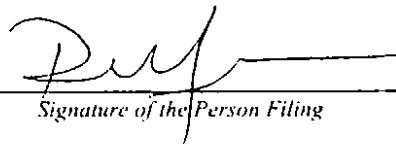
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

ESM ASSOCIATION OF CENTRAL FLORIDA, INC.  
P.O. BOX 593844  
ORLANDO, FL 32859

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.

RICHARD MERGO

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