## N36/09

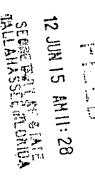
(Requestor's Name)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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T. LEWIS

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
SUBJECT: Dissolution of the Okaloo	sa Policy C	Council	
DOCUMENT NUMBER: N36109			
The enclosed Articles of Dissolution and fee an	re submitted fo	r filing.	
Please return all correspondence concerning this matter to the following:			
Dr Robert L Grete			
(Name of Co	ontact Person)		
(Firm/C	ompany)		
277 Wava Avenue			
(Add	ress)		
Niceville FL 32578		,	
(City/State as	nd Zip Code)		
For further information concerning this matter,	please call:		
Dr Robert L Grete	at ( 850	678-3266	
(Name of Contact Person)		ode & DaytimeTelephone Number)	
Enclosed is a check for the following amount:			
	\$43.75 Filin Certified Co (Additional of enclosed)	py Certificate of Status &	
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 617.1403, 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: OKALOOSA POLICY COUNCIL, INC The document number of the corporation (if known): N36109 SECOND: THIRD: Adoption of Dissolution (COMPLETE SECTION I OR II) SECTION I If the corporation has members entitled to vote: (CHECK/COMPLETE ONE) The date of the meeting of members at which the resolution to dissolve was adopted . The number of votes cast by the members was sufficient for approval. The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes. **SECTION II** If the corporation has no members or members entitled to vote on the dissolution: The corporation has no members or members entitled to vote on the dissolution. The date of adoption of the resolution by the board of directors was 25 April 2012 The number of directors in office was 5 and the vote for resolution was for and 0 against. (must be a majority vote) 5

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.)

Robert L Grete

(Typed or printed name of the person signing)

Chairman

Effective date of dissolution if applicable: 25 April 2012

(no more than 90 days after dissolution file date)

FOURTH:

FILING FEE: \$35

(Title of person signing)

## **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: Okaloosa Policy Council, 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: All justifying information. Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) Dr Robert L Grete 277 Wava Avenue Niceville FL 32578 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. Dr Robert L Grete

Signature of the Person Filing

Printed Name of the Person Filing