## N40995

(Re	questor's Name)	
(Ad	dress)	
(Address)		
(Cit	ty/State/Zip/Phone	<del>+ #)</del>
	·	
PICK-UP	☐ WAIT	MAIL
•		
	siness Entity Nam	
(60	isiness Enuty Nam	ie;
(Do	ocument Number)	
Certified Copies	rtified Copies Certificates of Status	
•		
Special Instructions to	Filing Officer:	
	·g	

Office Use Only



100294981681

02/01/17--01009--017 \*\*35.00

2017 FEB - 1 AM 10: 16

2/202

## **COVER LETTER**

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corporations

SUBJECT: DISSOLUTION OF CORPORATION		
DOCUMENT NUMBER: N 40995		
The enclosed Articles of Dissolution and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
JOHN HAMMOND		
(Name of Contact Person)		
SOUTHEASTERN CHAPTER OF NEDA INC		
(Firm/Company)		
. 4494 N. JOHN YOUNG PARK WAY (Address)		
ORLANDO FL 32804		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
TOHN HAMMOND at (407) 563-0311 (Area Code) (Daytime Telephone Number)		
(Name of Contact Person) (Area Code) (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 & Certificate of Status  □ \$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)		
MAILING ADDRESS: STREET ADDRESS:		

Amendment Section

Clifton Building

**Division of Corporations** 

Tallahassee, FL 32301

2661 Executive Center Circle

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following

Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of Stat FIRST: SOUTHEASTERN CHAPTER OF NEDA INC The document number of the corporation (if known): 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 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 number of directors in office was 2 and the vote for resolution was 2 for and against. (Must be a majority vote) Effective date of dissolution, if applicable: JANUARY 23, 2017 **FOURTH** (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State records. 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) JOHN HAMMOND (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35