N44022

(Requestor's N	ame)
(Address)	
(Address)	
(City/State/Zip/l	Phone #)
PICK-UP WAI	T MAIL
(Business Entit	y Name)
(Document Nur	mber)
Certified Copies Certif	icates of Status
Special Instructions to Filing Office	r:
Form	4/15

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Letter Number: 520A00007195

FLORIDA DEPARTMENT OF STATE Division of Corporations

April 2, 2020

GERALD J CONJELKO 8529 SW SEA CAPTAIN DR. STUART, FL 34997

SUBJECT: TREASURE COAST R/C AERO MODELERS, INC.

Ref. Number: N44022

We have received your document and check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Articles of Dissolution for a nonprofit corporation must comply with either section 617.1401 or 617.1403, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Section 607.1407 or 617.1047, Florida Statutes, requires a Notice of Corporate Dissolution contain a description of the information that must be included in a claim.

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) 245-6050.

Querida R Moore Regulatory Specialist II



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 21, 2020

GERALD J CONJELKO 8529 SW SEA CAPTAIN DR. STUART, FL 34997

SUBJECT: TREASURE COAST R/C AERO MODELERS, INC.

Ref. Number: N44022

We have received your document for TREASURE COAST R/C AERO MODELERS, INC. and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE INCORRECT FORM WAS SUBMITTED.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Letter Number: 220A00003874

Cheryl R McNair Regulatory Specialist II

www.sunbiz.org

COVER LETTER

Division of Corporations
SUBJECT: TREASURE COAST R/C AGROMODELERS, INC
The enclosed Articles of Dissolution and fee are submitted for filing.
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SERALD CONTELKO :: (Name of Contact Person)
(Name of Contact Person) No. 1 TREASURE COAST R/C AEROMONEUS, INC. (Firth/Company)
(Firth/Company) 8529 SN SEA CASTAIN DR
(Address) STURET FL 34997 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (772) 286-6227 (Daytime Telephone Number)
Enclosed is a check for the following amount: \$\\\B_55.00 - SEWT
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee, Certificate of Certificate of Status & Certified Copy (Additional copy is enclosed)

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Amendment Section

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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 State: FIRST: TREASURE CORST R/C ACRO MODELERS, INC 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 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 _____ The number of directors in office was _____ and the vote for resolution was _____ and against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: (no more than 90 days after dissolution file date)

<u>Note:</u> 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's records.

Signature: Derald Worth

(By the chairman or vice chairman of the bond, 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)

SERALD T CONTELEO
(Typed or printed name of person signing)

(Typed or printed name of person signing)

SECRETARY TREASURER
(Title of person signing)

Filing Fee: \$35