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TALLAHASSEF FI ORIDA

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COVER LETTER

TO: Amendment Section

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Amendment Section

P.O. Box 6327

Division of Corporations
SUBJECT: DISSOLUTION OF NON-PROFIT CORPORATION
DOCUMENT NUMBER: N 44 541
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
RICHARD DEIGHTOW (Name of Person)
WEST COAST FLORIST ASSOC
(Name of Firm/Company)
PO BOX 2112 (Address)
ZEPHYRHIUS FC 33539 (City/State/and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (813) 782-110 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\frac{1}{2}\$

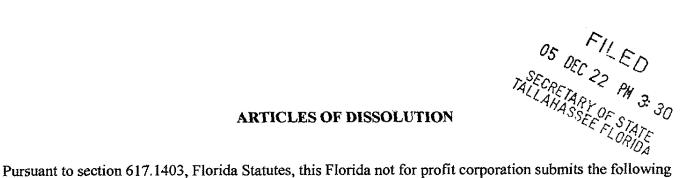
STREET ADDRESS:

Division of Corporations

Tallahassee, Florida 32399

Amendment Section

409 E. Gaines Street



ARTICLES OF DISSOLUTION

Articles of Dissolution: FIRST: The name of the corporation as currently filed with the Florida Department of State: FLORIDA, IMC, The document number of the corporation (if known): NUISY SECOND: THIRD: 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 resolution to dissolve was adopted 10/31/2005 (CHECK ONE) The number of votes cast for dissolution was sufficient 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 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

for and _____ against. (must be a majority vote)

date)
' -

(Title of person signing)

FILING FEE: \$35