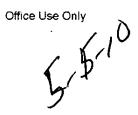
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	e #)
PICK-UP WAIT	MAIL
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(Document Number)	
Certified Copies Certificates	s of Status
Special Instructions to Filing Officer:	





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT: Pensacola Bay Area Liter	acy Coalition dissolution
SUBJECT:	
DOCUMENT NUMBER: N930000380	01
The enclosed Articles of Dissolution and fee are	submitted for filing.
Please return all correspondence concerning this r	matter to the following:
Rita L. Icenogle	
(Name of Cont	act Person)
Pensacola Bay Area Literacy Co	alition dissolution
(Firm/Con	npany)
P. O. Box 853	
(Addres	s)
Pensacola, FL 32591	
(City/State and	Zip Code)
For further information concerning this matter, plants	ease call:
Rita Icenogle a	t(850) 444-7111
(Name of Contact Person)	(Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
	\$43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$\$ Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section	STREET ADDRESS: Amendment Section
Division of Corporations	Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## 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:
	Pensacola Bay Area Literacy Coalition, Inc.
SECOND:	The document number of the corporation (if known): N9300003801
THIRD:	The file date of the articles of incorporation: 08/23/1993
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:
	☐ The dissolution was authorized by an incorporator.
	☐ The dissolution was authorized by a majority of the incorporators.
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)	
	Carolyn Formsma
	(Typed or printed name of person signing)
	President (Title of person signing)

Filing Fee: \$35