

# N94000000378



## Epworth Village

Retirement Community  
5300 WEST 16th AVENUE  
HIALEAH, FLORIDA 33012 - 2199

City/State/Zip

Phone #

**FILED**  
97 AUG 21 AM 7:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **500002256165--3**  
-08/04/97--01061--005
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **\*\*\*\*\*35.00 \*\*\*\*\*35.00**
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

V8 AUG 26 1997

*Vold's*



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

August 14, 1997

JULIA EDWARDS  
EPWORTH VILLAGE  
5300 WEST 18TH AVENUE  
HIALEAH, FL 33012-2199

SUBJECT: RESIDENT ASSEMBLY, INC.  
Ref. Number: N94000000378

We have received your document for RESIDENT ASSEMBLY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted two documents to dissolve the subject corporation. Please choose the correct type of dissolution according to Florida Statutes and resubmit only one document.

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) 487-6909.

Velma Shepard  
Corporate Specialist

Letter Number: 797A00041310

RECEIVED  
97 AUG 21 PM 1:25  
DIVISION OF CORPORATIONS

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida nonprofit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is Resident Assembly, Inc.  
SECOND: 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 was \_\_\_\_\_.

(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 with voting rights:

The corporation has no members or members with voting rights.

The date of adoption of the resolution by the board of directors was December 31, 1997.

The number of directors in office was 4 and the vote for the resolution was 4 for and 0 against.

Signed this 25th day of July, 19 97.

Signature Julia J. Edwards  
(By the Chairman or Vice Chairman of the Board, President or other officer)

JULIA EDWARDS

Typed or printed name

President

Title

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