

Division of Corporations Electronic Filing Cover Sheet

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(((H140001358753)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number : 076117000420

Phone : (561)650-0728

JUN 12 2014

Fax Number : (561)671-2527

R. WHITE

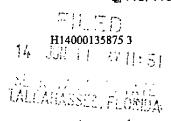
## DISSOLUTION OR WITHDRAWAL CYPRESS EQUITY FUND MANAGEMENT CORP.

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Estimated Charge	\$35.00

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## ARTICLES OF DISSOLUTION

FIRST;	The name of the corporation as currently filed with the Florida Department of State;	
	Cypress Equity Fund Management Corp.	
SECOND:	The document number of the corporation (if known): N94000003341	
THIRD:	Adoption of Dissolution (COMPLETE SECTION LOR 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.	r
	■ The resolution was adopted by written consent of the members and executed in accordance section 617.0701, Florida Statutes.	c with
	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)	for .
FOURTH	Effective date of dissolution, if applicable:  (no more than 90 days after dissolution file date)	
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 heads of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)	
	Panela Murphy (Typed or printed name of person signing)	
	Via President / Treasurer (Tide of person signing)	

Filing Fee: \$35

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## Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Cor	rporation; Cypress Equity Fund Management Corp.
	olution will be the date the dissolution is filed with the Department of State or as the Articles of Dissolution.
Description (	of information that must be included in a claim:
1. Name a	address and telephone number of the claimant.
2. The am	nount of the claim.
3. The dat	ite on which the event on which the claim is based occurred.
4. A brief	description of the nature of the debt or the basis for the claim.
5. The do	cumentation for the claim.
Mailing addr	ress where claims can be sent: (Claims cannot be sent to the Division of Corporations)  Pamela S. Murphy, CPA, VP Finance and Accounting
	Enterprise Florida
	800 N, Magnolla Ave., Ste. 1100
	Orlando, FL 32803

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Panela Murphy
Printed Name of the Person Filing
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00