

N94000005062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

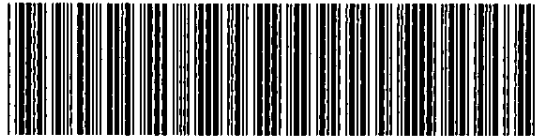
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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10/27/08--01010-025 \*\$35.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 OCT 27 PM 3:12

FILED

*voided  
Trevin  
10-29-08*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Articles of Dissolution

**DOCUMENT NUMBER:** \_\_\_\_\_

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald R. Trombley

(Name of Contact Person)

c/o H.D. Vest

(Firm/Company)

P.O. Box 492025

(Address)

Leesburg, Florida 34749-2025

(City/State and Zip Code)

For further information concerning this matter, please call:

Donald R. Trombley

(Name of Contact Person)

at ( 352 ) 255-7137

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee.<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>enclosed) |
|---|--|---|---|

**MAILING ADDRESS:**

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

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, 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:

Christian Social Services of Lake & Sumter Counties, Inc.

SECOND: The document number of the corporation (if known): N94000005062

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 the meeting of members at which the resolution to dissolve was adopted  
\_\_\_\_\_. The number of votes cast by the  
members was sufficient for approval.
- ☒ 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 September 30, 2008

The number of directors in office was 3 and the vote for resolution was  
2 for and \_\_\_\_\_ against. (must be a majority vote)

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FOURTH: Effective date of dissolution if applicable: September 30, 2008 or Filing date  
(no more than 90 days after dissolution file date)

Signature

Donald R. Trombley

(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.)

Donald R. Trombley

(Typed or printed name of the person signing)

President - Board Chairman

(Title of person signing)

**FILING FEE: \$35**

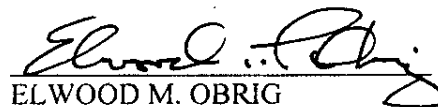
**CHRISTIAN SOCIAL SERVICES of LAKE and SUMTER COUNTIES, INC.,**

**PLAN OF DISTRIBUTION UPON DISSOLUTION**

1. All obligations and liabilities have been paid or discharged.
2. All assets held by the corporation upon condition requiring return have been returned.
3. All other assets received or held by the corporation including all remaining tangible personal property have been donated to Habitat for Humanity of Lake County, which is also a 501©(3) charitable organization.

Adopted by a majority of the Board of Directors this 30<sup>th</sup> day of September 2008, being 2 of the 3 remaining members of the Board.

  
DONALD R. TROMBLEY

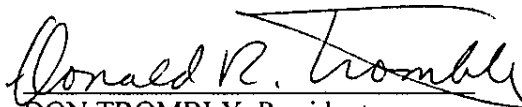
  
ELWOOD M. OBRIG

**AUTHENTICATION AND CERTIFICATE OF COMPLIANCE  
PURSUANT TO SECTION 617.1406, FLORIDA STATUTES**

I, Donald R. Trombley, President, hereby certify that a majority of directors then in office as of September 30, 2008, adopted the above plan of distribution by their written consent and I hereby authenticate this copy as a true copy thereof.

Date: \_\_\_\_\_

Oct 24, 2008

  
DON TROMBLY, President