## N95000004857

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

Office Use Only



000122550480

04/11/08--01008--018 \*\*35.00

FILED

2008 AFR 11 PM 2: 40

SEURETARY OF STATE
TALLAHASSEF, FI ORIO

Dissolution

 $B \downarrow$ 

4-15-08

## **COVER LETTER**

TO: Amendment Section

Division of Corporations
SUBJECT: Friends of the Feathered Inc.
DOCUMENT NUMBER: N 95 00000 1857
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Carol A. Tallman (Name of Contact Person)
(Name of Contact Person)
Friends of the Feathered Inc.
(* <sub>+</sub>
7410 W. Newcastle Ct. (Address)
Qunnellon FL. 34433 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (352) 795 - 9819  (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigcup \$43.75 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Opy (Additional copy is enclosed) (Additional copy is 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

## ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following

Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Friends of the Feathered Inc. The document number of the corporation (if known): N95 00000 4857 SECOND: 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 3-8-08The number of directors in office was 3 and the vote for resolution was 3 for and \_\_\_\_ against. (must be a majority vote)

•
Signature allen Delm
(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.)
Allen R. Tallman
(Typed or printed name of the person signing)
President
(Title of person signing)

Effective date of dissolution if applicable:

FOURTH:

3 - 8 - 08
(no more than 90 days after dissolution file date)

FILING FEE: \$35