

N960000000013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

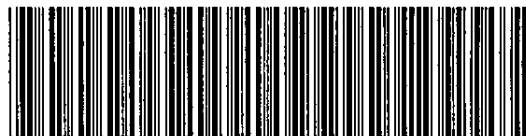
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000276162180

08/21/15--01015--001 **43.75

less with notice

FILED
2015 AUG 21 PM 1:50
CLERK OF STATE
TALLAHASSEE, FLORIDA

AUG 21 2015
A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of a Corporation

DOCUMENT NUMBER: N96000000013

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

Please return all correspondence concerning this matter to the following:

RONALD FROMAN

(Name of Contact Person)

Florida Human Resources Development, Inc.

(Firm/Company)

1431 Bird Rd.

(Address)

Winter Springs, FL 32708

(City/State and Zip Code)

For further information concerning this matter, please call:

RONALD FROMAN

(Name of Contact Person)

at (407)

(Area Code)

399-6306

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☒ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (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
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

FILED

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:

Florida Human Resources Development, Inc.

SECOND: The document number of the corporation (if known): N9600000013

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 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 8/13/15.

The number of directors in office was 5 and the vote for resolution was 5 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: 8/13/15
(no more than 90 days after dissolution file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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)

RONALD D. FROMAN

(Typed or printed name of person signing)

Board Chairman

(Title of person signing)

Filing Fee: \$35

PLAN OF DISTRIBUTION

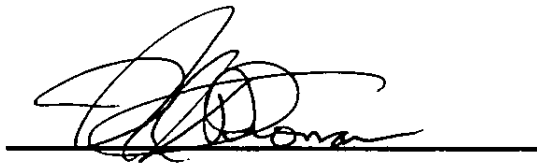
DISSOLUTION OF FLORIDA HUMAN RESOURCES DEVELOPMENT, INC.

Document # : NA600000013

ALL THE ORGANIZATION'S CREDITORS HAVE BEEN PAID.

THE ORGANIZATION'S BANK BALANCE IS ZERO.

THERE ARE NO REMAINING ASSETS TO DISTRIBUTE.



RONALD FROMAN

EXECUTIVE DIRECTOR /
BOARD CHAIRMAN

8/13/15

DATE