

N98000000281

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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16-30-15

FILED
2015 JUN -5 PM 4:16
OFFICE OF THE STATE
CLERK, FLORIDA

JUN 15 2015
A. RAMSEY



June 4, 2015

Via Federal Express

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Disabled Police Officers of America, Inc.

Dear Sir/Madam:

Enclosed please find the above organization's Articles of Dissolution, Plan of Dissolution and check for \$43.75, which includes the fee for filing the document and returning a certified copy.

Thank you in advance for your assistance. Should you have a questions or comments regarding the above, feel free to contact me.

Very truly yours,

A handwritten signature in cursive script that reads "Amy Lloyd".

Amy Lloyd
Legal Assistant
For the Firm

Enclosures

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Disabled Police Officers of America, Inc.

DOCUMENT NUMBER: N98000000281

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

Please return all correspondence concerning this matter to the following:

Nathan Thomas

(Name of Contact Person)

Copilevitz & Canter, LLC

(Firm/Company)

310 W. 20th St., Suite 300

(Address)

Kansas City, MO 64108

(City/State and Zip Code)

For further information concerning this matter, please call:

Nathan Thomas

(Name of Contact Person)

at (**816**)

(Area Code)

472-9000

(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

RECEIVED
16-30-15

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:
Disabled Police Officers of America, Inc.

SECOND: The document number of the corporation (if known): N98000000281

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

May 1, 2015. 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 _____.

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

FOURTH Effective date of dissolution, if applicable: June 30, 2015
(no more than 90 days after dissolution file date)

Signature: Terry Morrison
(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)

Terry Morrison

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35