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| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE DIVISION OF CORPORATIONS

ALJ DISSIONS 103.4.15

COVER LETTER

TO: Amendment Section

| Division of Corporations | | |
|--|--|--|
| SUBJECT: Support Dance, Inc. | | |
| DOCUMENT NUMBER: <u>N98000003856</u> | | |
| The enclosed Articles of Dissolution and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Tami Valentine (Name of Contact Person) | | |
| (Name of Contact Person) | | |
| Support Dance, Inc. (Firm/Company) | | |
| 4355 Pear Tree Circle Apt A (Address) | | |
| (Address) | | |
| Boynton Beach, FL 33436 (City/State and Zip Code) | | |
| (City/State and Zip Code) | | |
| For further information concerning this matter, please call: | | |
| Tami Valentine at (561) 315-9678 (Name of Contact Person) (Area Code) (Daytime Telephone Number) | | |
| Enclosed is a check for the following amount: | | |
| \$35 Filing Fee \$\times \text{S43.75 Filing Fee & Certificate of Status}\$\$ Certificate of Status & Certified Copy (Additional copy is enclosed)\$\$ (Additional copy is enclosed)\$\$ (Additional copy is enclosed)\$\$ | | |
| MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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: The name of the corporation as cure.

Support Dance, Inc.

The document number of the corporation (if known): N98000003856 FIRST: SECOND: THIRD: **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 12/8/2014. The number of votes cast by the members was sufficient for ☐ 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: (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 hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) (Typed or printed name of person signing) Secretary (Title of person signing)

Filing Fee: \$35