

N98000004628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

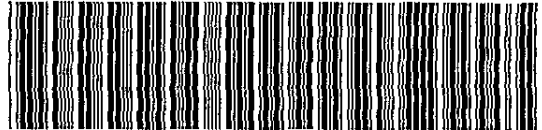
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF NON-PROFIT

DOCUMENT NUMBER: N9800000 4628

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

Please return all correspondence concerning this matter to the following:

CAROL W. ATCHISON
(Name of Person)

PANAMA CITY WOMEN'S BOWLING ASSOCIATION, INC
(Name of Firm/Company)

3201 WOOD VALLEY ROAD
(Address)

PANAMA CITY, FL 32405
(City/State/and Zip Code)

For further information concerning this matter, please call:

LINDA SALE at (850) 769-2136
(Name of Person) (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 &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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, Florida 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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:

PANAMA CITY WOMEN'S BOWLING ASSOCIATION, INC.

SECOND: The document number of the corporation (if known): N 98 000004628

THIRD: Adoption of Dissolution
(Complete Section I or II)

SECTION I

If the corporation has members entitled to vote:

The date of the meeting of members at which the resolution to dissolve was adopted

SEPT 19, 2004

(CHECK ONE)

☒ The number of votes cast for dissolution was sufficient for approval.

☐ The resolution was adopted by written consent and executed in accordance with 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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOURTH: Effective date of dissolution if applicable: APRIL 30, 2005
(no more than 90 days after dissolution file date)

Signed this 27TH day of APRIL, 2005.

Signature Carol W. Atchison
(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.)

CAROL W. ATCHISON
(Typed or printed name of the person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35