

N98000006657

(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



800240790088

10/16/12--01005--003 **43.75

FILED
12 OCT 16 AM 10:12
SECURITY STATE
TALLAHASSEE FLORIDA

*voids/wrote
CWs

OCT 17 2012

C. MUSTAIN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of The Next Step: North American Partnership in Mission Training, Inc.

DOCUMENT NUMBER: N98000006657

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

Please return all correspondence concerning this matter to the following:

James A. Roche Jr.

(Name of Contact Person)

The Next Step: North American Partnership in Mission Training, Inc.

(Firm/Company)

c/o Box 211755

(Address)

Columbia, SC 29221-1755

(City/State and Zip Code)

For further information concerning this matter, please call:

James A. Roche Jr.

(Name of Contact Person)

at (803) 451-8602

(Area Code & 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

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:
The Next Step: North American Partnership in Mission Training, Inc.

SECOND: The document number of the corporation (if known): N98000006657

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 October 8, 2012

The number of directors in office was 3 and the vote for resolution was
3 for and 0 against. (must be a majority vote)

FILED
12 OCT 16 AM 10:29
TALLAHASSEE, FLORIDA

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 617.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: The Next Step: North American Partnership in Mission Training, Inc.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Nature of claim for service provided or for service rendered

Date of claim

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Dr. James Roche

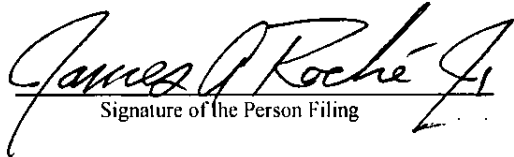
P.O. Box 211755

Columbia, SC 29221-1755

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

James A. Roche, Jr.

Printed Name of the Person Filing


Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

FOURTH: Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

Signature James A. Roche Jr.
(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.)

James A. Roche, Jr.
(Typed or printed name of the person signing)

Chairman of the Board
(Title of person signing)

FILING FEE: \$35