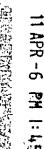
(Re	equestor's Name)	
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V.	,	
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PICK-UP	☐ WAIT	MAIL
(R)	usiness Entity Name	2)
(Di	Jamesa Litaty Warre	<del>-</del> ,
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
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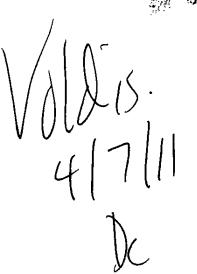
Office Use Only



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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: ARTICLES OF DISSO	plution
DOCUMENT NUMBER: N9900000	463
The enclosed Articles of Dissolution and fee are submitte	d for filing.
Please return all correspondence concerning this matter to	the following:
William MEADE (Name of Contact Person	<del>,</del>
(Name of Contact Person	)
NAPM-FLOZIDA (Firm/Company)	SUN COAST, INC.
(Firm/Company)	•
5967 CAMELOT De (Address)	IVE NORTH
SARASOTA, FLORIDA (City/State and Zip Code)	34233
(City/State and Zip Code)	
For further information concerning this matter, please call:	:
1) 11 mm 10 50 DIT 01 Q4	1 \ 915-2151
WILLIAM MEADE at (94) (Name of Contact Person) (Ar	rea Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & Certificate of Status Certified (Addition enclosed)	nal copy is Certified Copy
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 617.1401, 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:		
	NAPM-FLORIDA SUN COAST, INC.		
SECOND:	The document number of the corporation (if known): N9900000463		
THIRD:	The file date of the articles of incorporation: 0//21/99		
FOURTH	The corporation has not commenced to conduct its affairs.		
FIFTH:	No debts of the corporation remains unpaid.		
SIXTH:	Adoption of Dissolution (CHECK ONE) (Note: Cannot be authorized by an incorporator if the corporation has directors)		
	The dissolution was authorized by a majority of the directors: OR		
	☐ The dissolution was authorized by an incorporator.		
	☐ The dissolution was authorized by a majority of the incorporators.		
Signe	ature: William Mead		
Signa	(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)		
	TREASURE (Title of person signing)		

Filing Fee: \$35