

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Lise On	lu.



03/22/10--01014--006 **35.00

COVER LETTER

Division of Corporations
SUBJECT: DISSOLUTION 501c 3
DOCUMENT NUMBER:
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
VITO MA-12CHESE (Name of Contact Person)
(Name of Contact Person)
VERO BEACH KIWANIS CLUIS (Firm/Company)
(Firm/Company)
1 ² .0. 6012 (Address)
(Address)
VERO BEACH, $I=L$ 32961 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
VITO MAINCHESE at (772) >66-6958 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & DaytimeTelephone Number)
Enclosed is a check for the following amount:
■ \$43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS: Amondment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

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:		
	KIWANIS OF VERO BEACH, INC.		
SECOND:	The document number of the corporation (if known): N 99000002687		
THIRD:	The file date of the articles of incorporation: $05/03/1999$		
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: OR OR OR OR OR OR OR OR OR O		
	☐ The dissolution was authorized by an incorporator.		
	☐ The dissolution was authorized by a majority of the incorporators.		
Sign	ature: When 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)		
	/ ^P RESIDENT (Title of person signing)		
	(Title Or person signing)		

Filing Fee: \$35