

N99000003356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

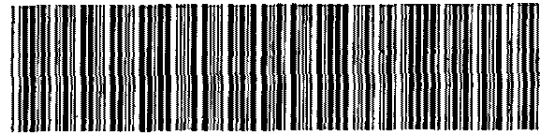
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100036465431

Vol.  
diss of  
inactive  
corp.

05/21/04--01042--013 \*\*70.00

FILED  
04 JUN -7 PM 2:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ASR  
6/7/04

\*00789, 00567, 00524, 00671

**TRANSMITTAL LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: 6 Ada Wheelchair Logo  
Special Housing for Indep. Living Inc

DOCUMENT NUMBER: \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Diane SIMPSON

(Name of Person)

Diane SIMPSON CPA P.A.

(Name of Firm/Company)

8644 NW 29 Drive

(Address)

Coral Springs FL 33065

(City/State/and Zip Code)

For further information concerning this matter, please call:

Diane SIMPSON

(Name of Person)

at ( 954 ) 647-0546

(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, Florida 32314

**STREET ADDRESS:**

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 26, 2004

Diane Simpson  
Diane Simpson CPA, P.A.  
8644 NW 29 dRIVE  
Coral Springs, FL 33065

SUBJECT: ADA (WHEELCHAIR LOGO) SPECIAL HOUSING FOR  
INDEPENDENT LIVING, INC..  
Ref. Number: N99000003356

We have received your document for ADA (WHEELCHAIR LOGO) SPECIAL HOUSING FOR INDEPENDENT LIVING, INC.. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution for a nonprofit corporation must comply with either section 617.1401 or 617.1403, Florida Statutes.

You have submitted a profit dissolution form and your corporation is a not for profit corporation. I have enclosed the correct form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey  
Document Specialist

Letter Number: 104A00036762

ARTICLES OF DISSOLUTION

104A 000 26762  
Annette Ramsey

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 is ADA (Wheelchair Logos) Special Housing for Independent Living, Inc.

SECOND: The articles of incorporation were filed on 5-27-99

THIRD: The corporation has not commenced to conduct its affairs.

FOURTH: No debts of the corporation remain unpaid.

FIFTH: 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.

Signed this 3 day of June, 2004

Signature

(By the Chairman or Vice Chairman of the Board of Directors, President or other officer - if Directors have not been selected by an incorporator.)

Renee GOLDBERG

Typed or printed name

PRESIDENT

Title