

(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:	
J DENNIS	
JUN 2 0 2023	

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution	_
DOCUMENT NUMBER: N9900003427	.
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jo Anne Walker Demag (Name of Contact Person)	
Babson Park Lommunity (Firm/Company)	Church, Inc
2330 Thoreau Drive	
Lake Wales Fl. 33898	
(City/State and Zip Code)	
For further information concerning this matter, please call: Softween Contact Person	1914 Telephone Number)
Enclosed is a check for the following amount:	
	g Fee, Certificate of fied Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations Street Address: Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallah	assee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution: The name of the corporation as currently filed with the Florida Department of State: FIRST: Babson Park Community Church The document number of the corporation (if known): M = MSECOND: 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 meeting of members at which the resolution to dissolve was adopted Waru 6, 2022. 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 ___________ The number of directors in office was _____ and the vote for resolution was _____ for and against. (Must be a majority vote) Effective date of dissolution, if applicable: **FOURTH** (no more than 90 days after dissolution file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Signature: (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

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

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

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.