

N99000003610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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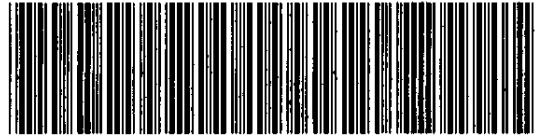
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APR 29 2010

#1-C

2nd Notice
Post #1101 P. 19/ April/10

COVER LETTER

(Filed under
Chapter 617)

TO: Amendment Section
Division of Corporations

SUBJECT: (DISSOLVE) INC. OF: GENERAL CASIMIR PULASKI, Post #204,
THE POLISH LEGION OF AMERICAN VETERANS, U.S.A. INC.

DOCUMENT NUMBER: N99000003610 = #3867895375

The enclosed Articles of Dissolution and fee are submitted for filing. \$35.00 FEE SUBMITTER
- Tue 6/ April/10

Please return all correspondence concerning this matter to the following:

SILVIO F. SPICONARDI CMDR.
(Name of Contact Person)

(Firm/Company)

52 SMYRNA DRIVE (HOME) VOLUSIA COUNTY,
DEBARY FLORIDA #32713-3232
(City/State and Zip Code)

For further information concerning this matter, please call:

CMDR. S.F. SPICONARDI at (.386) 668-7742
(Name of Contact Person) (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)

sent in
TUE. 6/APRIL/10

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2010

SILVIO F SPICONARDI
52 SMYRNA DR
DEBARY, FL 32713-3232

SUBJECT: GENERAL CASIMIR PULASKI, POST 204, THE POLISH LEGION
OF AMERICAN VETERANS, U.S.A., INC.
Ref. Number: N99000003610

We have received your document for GENERAL CASIMIR PULASKI, POST 204, THE POLISH LEGION OF AMERICAN VETERANS, U.S.A., 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):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 410A00009330

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2010 APR 28 AM 11:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 GENERAL CASIMIR PULASKI, POST #204, THE POLISH LEGION
OF AMERICAN VETERANS, U.S.A., INC.

SECOND: The document number of the corporation (if known): N99000003610

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
Fri 5/Feb/10. 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)~~

#1-0Y

FOURTH: Effective date of dissolution if applicable: TUE. 6/APRIL/10
(no more than 90 days after dissolution file date)

Signature

Silvio F. Spiconardi, Cmdr.

(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.)

SILVIO F. SPICONARDI, Cmdr.

(Typed or printed name of the person signing)

— COMMANDER —

(Title of person signing)

FILING FEE: \$35

- Filed -
Tue 6/APRIL/10