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COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: ____ Spectrum Financial Corporation P01000072101 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Gayle S. Finger (Name of Contact Person) Crestmark, a division of MetaBank (Firm/Company) 5480 Corporate Drive, Ste. 350 (Address) Troy, MI 48098 (City/State and Zip Code) For further information concerning this matter, please call: Gayle S. Finger (Name of Contact Person) (Area Code) (Daytime Telephone Number) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & ■ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & (Additional copy is Certified Copy enclosed) (Additional copy is enclosed)

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 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: Spectrum Financial Corporation				
SECOND:	The document number of the corporation (if known):				
THIRD:	: The date dissolution was authorized: August 1, 2018				
	Effective date of dissolution if applicable: August 1, 2018				
	(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.				
FOURTH:	TH: Adoption of Dissolution (CHECK ONE)				
	■ Dissolution was approved by the shareholders. The number of votes east fo was sufficient for approval.	r dissol	ution		
	☐ Dissolution was approved by the shareholders through voting groups.				
	The following statement must be separately provided for each voting group ent to vote separately on the plan to dissolve:	itled			
	The number of votes cast for dissolution was sufficient for approval by	19 AUG -6	SECRETAR IVISION OF (
	(voting group)	PM 2: 30	Y OF STATE		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		. <i>.</i> ,		
	James Recker, Esq.				
	(Typed or printed name of person signing)				
	Senior Vice President				
	(Title of person signing)				