

PO4000076474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

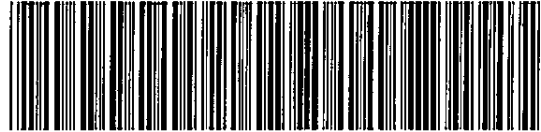
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600061541366

FILED
05 NOV 21 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VOIDS
26
11/28

SILVER & SILVER

Attorneys at Law

MAX R. SILVER
IRA S. SILVER

MARYVEL DE CASTRO VALDES

108 S. MIAMI AVENUE, 2ND FLOOR
MIAMI, FLORIDA 33130

TELEPHONE (305) 374-4788
TELECOPIER (305) 358-6535
E-MAIL: SILVER-SILVER@MSN.COM

November 17, 2005

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

Re: Articles of Dissolution
Card Sound Condominium Association, Inc.
Document Number P04000076474

Gentlemen:

Enclosed you will find the Articles of Dissolution together with your fee of \$35.00 for filing this Dissolution.

Please return all correspondence concerning this matter to:

John F. Gadway
27707 S. Dixie Highway
Homestead, FL 33082

Very Truly Yours,

SILVER & SILVER


Maryvel De Castro Valdes
MDCV/jcs

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

Card Sound Condominium Association Inc.

SECOND: The document number of the corporation (if known): P04000076474

THIRD: The file date the articles of incorporation: 05/12/2004

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.

SEVENTH: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

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.)

JOHN. F. GADWAY

(Typed or printed name of person signing)

P, VP, ST

(Title of Person Signing)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 NOV 21 PM 12:21

FILED

Filing Fee: \$35