

PO 8000103404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

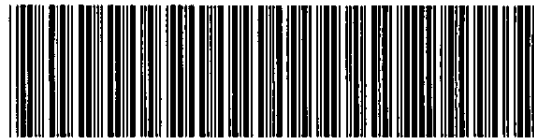
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
15 SEP 14 AM 7:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
2015 SEP 14 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP 16 2015
ST. JAMES
D.

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 782618 8941A

AUTHORIZATION

[Signature]

COST LIMIT : \$ 35.00

ORDER DATE : September 14, 2015

ORDER TIME : 9:05 AM

ORDER NO. : 782618-005

CUSTOMER NO: 8941A

DOMESTIC FILINGS

NAME: N50PS MANAGER, INC.

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER'S INITIALS: _____

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:
N50PS MANAGER, INC.

SECOND: The document number of the corporation (if known): P08000103404

THIRD: The date dissolution was authorized: June 5, 2015

Effective date of dissolution if applicable: June 5, 2015
(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: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

4 Shareholders

(voting group)

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)

Robert Mantovani

(Typed or printed name of person signing)

Director

(Title of person signing)

FILED
15 SEP 14 AM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF DISSOLUTION

OF

N50PS MANAGER, INC.

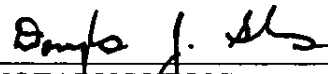
PURSUANT to the provisions of §607.1403 of the Florida Statutes, the undersigned Corporation adopts these Articles of Dissolution.

1. The name of this Corporation is N50PS MANAGER, INC.
2. The dissolution was authorized on June 5th, 2015.
3. The dissolution was approved by the shareholders. The number of votes cast in favor of the dissolution was four (4), which was sufficient for approval pursuant to law.
4. These Articles of Dissolution will take effect immediately upon filing with the Florida Department of State.

DATED at Palm Beach Gardens, Palm Beach County, Florida, this 5th day of June, 2015.

By 
Robert Mantovani, Director

5th **SWORN TO AND SUBSCRIBED** before me in the State and County aforesaid this day of June, 2015.


NOTARY PUBLIC
State of Florida at Large

☒ Personally Known

☐ Photographic Identification

Type: _____

My Commission Expires:

