

P14 000036363

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(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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MAY 08 2014  
C. CARROTHERS

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** renOWN HOMES, Inc

**DOCUMENT NUMBER:** P14000036363

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Richard Marino**

(Name of Contact Person)

**Financial Advisors Inc**

(Firm/Company)

**PO Box 700335**

(Address)

**St Cloud, FL 34770-0335**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Richard Marino**

(Name of Contact Person)

at **(407)**

(Area Code)

**301-4200**

(Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |   |
|---|--|---|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(Additional copy is<br>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 617.1401, 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:

**RENOWN HOMES INC**

SECOND: The document number of the corporation (if known): **P14000036363**

THIRD: The file date of the articles of incorporation: **04/22/2014**

FOURTH: The corporation has not commenced to conduct its affairs.

FIFTH: No debts of the corporation remains unpaid.

SIXTH: Adoption of Dissolution **(CHECK ONE)**  
(Note: Cannot be authorized by an incorporator if the corporation has directors)

- ☐ The dissolution was authorized by a majority of the directors:  
OR
- ☒ The dissolution was authorized by an incorporator.
- ☐ The dissolution was authorized by a majority of the incorporators.

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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)

**Shelly Ann Audet**

(Typed or printed name of person signing)

**President**

(Title of person signing)

**Filing Fee: \$35**