## PIMBBURIE PINE

| (Re                     | equestor's Name)  |              |
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| ·                       |                   |              |
| (Ad                     | ldress)           |              |
| (Ad                     | ldress)           |              |
| (Cit                    | y/State/Zip/Phone | · #)         |
| PICK-UP                 | MAIT              | MAIL         |
| (Bu                     | siness Entity Nam | ne)          |
| (Do                     | ocument Number)   | <del> </del> |
| Certified Copies        | _ Certificates    | of Status    |
| Special Instructions to | Filing Officer:   |              |
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## **COVER LETTER**

TO: Amendment Section Division of Corporations CAPITAL AMEN COMMINITY ACTUR ABONG HOLDENGY, FUC SUBJECT: P17000063426 DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Tim Center (Name of Contact Person) Capital Area COmmunity Action Agency, Inc. (Firm/Company) 309 Office Plaza Drive (Address) Tallahassee, FL 32301 (City/State and Zip Code) For further information concerning this matter, please call: Tim Center (Area Code) (Daytime Telephone Number) (Name of Contact Person) 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:** STREET ADDRESS: Amendment Section Amendment Section **Division of Corporations Division of Corporations** 

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

## 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:<br>Capital Area Community Action Agency Holdings, Inc.   |  |  |  |
|---------|---|--|--|--|
| SECOND: | The document number of the corporation (if known):  |  |  |  |
| THIRD:  | The date dissolution was authorized: November 27, 2018  |  |  |  |
|         | Effective date of dissolution if applicable:  (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   |  |  |  |
|         | Christy McElroy, Chair, Kara Smith, Treasurer, Derrick Jennings, Vice Chair, Harold Ross, Secretary   |  |  |  |
|         | (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) Harold Ross   |  |  |  |
|         | (Typed or printed name of person signing)   |  |  |  |
|         | Secretary   |  |  |  |
|         | (Title of person signing)   |  |  |  |