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## **COVER LETTER**

**TO:** Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** SUBJECT: CANCELLING FOR PROFIT CORPORATION **DOCUMENT NUMBER:** The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: WINSTON WILLIAMS (Name of Contact Person) (Firm/Company) 8370 NW 19 ST (Address) PEMBROKE PINES FL 33024 (City/State and Zip Code) For further information concerning this matter, please call: WINSTON WILLIAMS (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: STREET ADDRESS: Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## 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: HARVEST TIME RESTORATION MINISTRIES, INC.		
SECOND:	The document number of the corporation (if known):	<del>.</del>	
THIRD:	The file date of the articles of incorporation:	-	
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)	18 M	
	A majority of the incorporators authorized the dissolution.	AY 3	7
	A majority of the directors authorized the dissolution.	PH 3: 3	一下にて
Sign	(By a director) president or other officer - if directors or officers have not been selected, by an incorporator - in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	if	
	WINSTON WILLIAMS		
	(Typed or printed name of person signing)		
	WIRDCTOR (Title of Person Signing)		

Filing Fee: \$35