

P98000001954

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

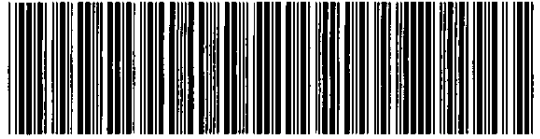
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Corrected document
by telephone call
TR 3/17/10

Office Use Only



100166076151

02/22/10--01035--023 **35.00

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FILED
10 MAR 17 AM 10:14
COMPTROLLER OF STATE
TALLAHASSEE, FLORIDA

Roberts MAR 18 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 25, 2010

ELLEN KAST
TAMPA BICYCLING TEAM, INC.
3917 EDEN ROC CIRCLE EAST
TAMPA, FL 33634

SUBJECT: TAMPA BICYCYLING TEAM, INC.
Ref. Number: P98000001954

We have received your document for TAMPA BICYCYLING TEAM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 910A00004659

RECEIVED
2010 MAR 17 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TAMPA BICYCLING TEAM, INC.

DOCUMENT NUMBER: P98 000001954

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

Please return all correspondence concerning this matter to the following:

ELLEN KAST

(Name of Contact Person)

(Firm/Company)

3917 EDEN ROE CIRCLE EAST

(Address)

TAMPA, FL 33634

(City/State and Zip Code)

For further information concerning this matter, please call:

ELLEN KAST

(Name of Contact Person)

at (813) 300-3010

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
- ↑*
previously
paid

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 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:

TAMPA BICYCLING TEAM, Inc.

SECOND: The document number of the corporation (if known): P98000001954

THIRD: The date dissolution was authorized: 3-1-10

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

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

SHAREHOLDERS
(voting group)

Signature: William B Shook
(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)

WILLIAM B. SHOOK
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

Filing Fee: \$35

FILED
10 MAR 17 AM 10:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: TAMPA BICYCLING TEAM, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

NONE KNOWN

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

~~EDEN ROSE~~ WILLIAM B SHOOK

3917 EDEN ROSE CIRCLE EAST

TAMPA, FL 33634

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

WILLIAM B SHOOK

Printed Name of the Person Filing

William B Shook

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00