

N140000000615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

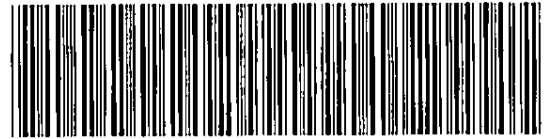
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Incorrect Form 1
Dissolution form

Office Use Only



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FILED
2023 AUG 17 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FL

AUG 23 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolution of non profit

DOCUMENT NUMBER: N14000000 615

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

Please return all correspondence concerning this matter to the following:

Kimberley Cheney
(Name of Contact Person)
400 Paws Inc
(Firm/Company)
6933 Angus Lane
(Address)
Molino FL 32577
(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberley Cheney at (850) 380 0547
(Name of Contact Person) (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)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, 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:

400 Paws, Inc

SECOND: The document number of the corporation (if known): N14000000615

THIRD: Adoption of Dissolution
(COMPLETE SECTION I OR II)

SECTION I

If the corporation has members entitled to vote:

(CHECK/COMPLETE ONE)

The date of meeting of members at which the resolution to dissolve was adopted

_____. The number of votes cast by the members was sufficient for approval.

The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

SECTION II

If the corporation has no members or members entitled to vote on the dissolution:

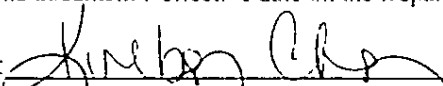
The corporation has no members or members entitled to vote on the dissolution.

The date of adoption of the resolution by the board of directors was Jan. 18, 2023

The number of directors in office was 4 and the vote for resolution was 4 for and 0 against. (Must be a majority vote)

FOURTH Effective date of dissolution, if applicable: August 31, 2023
(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.

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)

Kimbely Cheney
(Typed or printed name of person signing)

President
(Title of person signing)

COVER LETTER

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Division of Corporations

SUBJECT: Dissolution of non profit

DOCUMENT NUMBER: N14000000615

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ARTICLES OF DISSOLUTION

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FIRST: The name of the corporation as currently filed with the Florida Department of State:

400 PAWS Inc

SECOND: The document number of the corporation (if known): N14000000615

THIRD: The file date of the articles of incorporation: 2/27/14

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

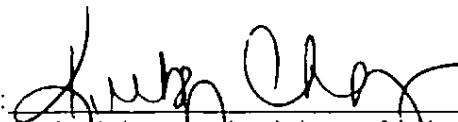
FIFTH: No debts of the corporation remains unpaid.

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.

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)

Kimberly Cheney
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35

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400 PAWS Inc

SECOND: The document number of the corporation (if known): N.14000000615

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(COMPLETE SECTION I OR II)

SECTION I

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(CHECK/COMPLETE ONE)

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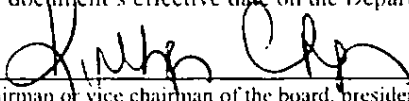
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Kimberly Cheney
(Typed or printed name of person signing)

President
(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 8, 2023

KIMBERLY CHENEY
6933 ANGUS LANE
MOLINO, FL 32577

Ref. Number: N1400000615

We have received your document for 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 form you submitted is for a CERTIFIED RESOLUTION, but your entity is a NON-PROFIT ARTICLES OF DISSOLUTION. Please complete and return the enclosed blank form(s).

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) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 123A00017857

