

152083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

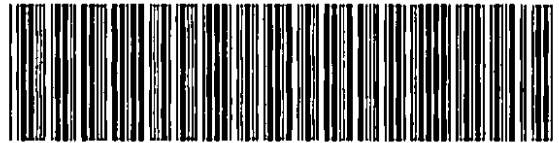
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700387172067

05/06/22--01025--001 **35.00

FILED

2022 MAY -6 AM 10:57

CLERK OF DISTRICT COURT
JAN 1 10 57 AM 2022

Rev.
of

JSS.
06/27/2022
DC

COVER LETTER

TO: Amendment Section
Division of Corporations

PUBLIC SERVICE CORPORATION

NAME OF CORPORATION: _____

152083

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Richard James

Name of Contact Person

PUBLIC SERVICE CORPORATION

Firm/Company

P.O. Box 3573

Address

Apollo Beach, FL 33572

City/State and Zip Code

PublicServiceTaxi@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Richard James

954

818-1978

At (_____) _____

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 REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is: _____
PUBLIC SERVICE CORPORATION

152083

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

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution

04/29/2022

filed with the Florida Department of State is _____

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.

05/04/2022

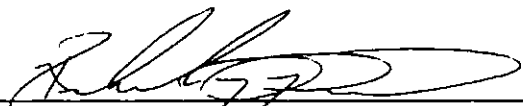
FOURTH: The Revocation of Dissolution was authorized on _____

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☐ The board of directors/incorporation revoked the dissolution.
- ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☒ The shareholders revoked the dissolution and was authorized by the shareholders in the manner required by this chapter and by the articles of incorporation.

SIXTH: A copy of the Articles of Dissolution is attached.

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)

Richard James

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35

FILED
2022 MAY -6 AM 10:57
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED
Apr 29, 2022
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

- FIRST: The name of the corporation as currently filed with the Florida Department of State:
PUBLIC SERVICE CORPORATION
- SECOND: The document number of the corporation: 152083
- THIRD: The date dissolution was authorized: April 29, 2022
Effective date of dissolution: April 29, 2022
- FOURTH: Dissolution was approved by the shareholders in the manner required by this chapter
and by Articles of Incorporation.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: RICHARD JAMES

PRESIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative