

N060000003191

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECURITY STATE
TALLAHASSEE, FLORIDA
13 DEC 11 PM 2:48

Rev of Diss

DEC 17 2013

T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PIERCE CONDOMINIUM ASSOCIATION, INC

DOCUMENT NUMBER: N06000003191

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

Please return all correspondence concerning this matter to the following:

EDWARD D CARROLL

Name of Contact Person

EZCOM TECHNOLOGIES INC

Firm/Company

3359 BELVEDERE ROAD SUITE O

Address

WEST PALM BEACH, FL 33406

City/State and Zip Code

dcarroll@ezcomtech.com

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

For further information concerning this matter, please call:

Edward D Carroll

Name of Contact Person

at (954) 242-9075

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF REVOCATION OF DISSOLUTION

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 DEC 11 PM 2:48

Pursuant to section 617.1404, Florida Statutes, this Florida not for 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 PIERCE CONDOMINIUM ASSOCIATION, INC.

SECOND: ✓ The document number of the corporation (if known) is N06000003191

THIRD: ✓ The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 10/18/2013

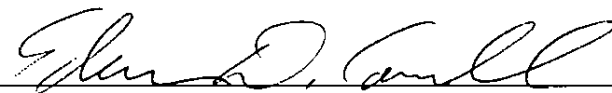
FOURTH: ✓ The revocation of dissolution was authorized on 11/3/2013

FIFTH: ✓ Adoption of revocation of dissolution (check one)

- ☒ The board of directors revoked the dissolution authorized by the members and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☐ The members revoked the dissolution and the number of votes cast was sufficient for approval.
- ☐ The members revoked the dissolution by resolution adopted by written consent and executed in accordance with s. 617.0701, Florida Statutes.
- ☐ The corporation has no members or members with voting rights. Revocation of dissolution was adopted by resolution by the board of directors. The number of directors in office was _____ and the vote for the resolution was _____ for and _____ against.

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

Signature


(By the chairman or vice chairman of the board, president or other officer, or by an incorporator, or trustee if applicable)

Typed or Printed Name EDWARD D CARROLL

Title PRESIDENT

FILING FEE \$35

FILED
Oct 18, 2013
Secretary of State

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:
PIERCE CONDOMINIUM ASSOCIATION, INC.
- SECOND:** The document number of the corporation: N06000003191
- THIRD:** 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 October 18, 2013.
The number of directors in office was 1 and the vote for resolution was
1 for and 0 against.
- FOURTH:** Effective date of dissolution: October 18, 2013

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: **ARMANDO AGUILAR**

PRESIDENT CEO

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