

N06000006890

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

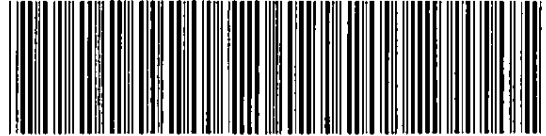
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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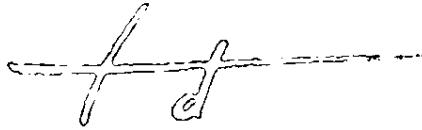


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7-3-2023



Trow & Dobbins, P.A.

ATTORNEYS FOR PEOPLE AND BUSINESSES

CHESTER J. TROW, RETIRED

THOMAS J. DOBBINS, ESQUIRE

June 8, 2023

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

via Fed-Ex

RE: Corporation: C & M LIFELINE, INC.
Document Number: N06000006890

Dear Sir/Madam:

Enclosed please find completed Articles of Revocation of Dissolution for the above-referenced Florida not for profit corporation. Also enclosed please find Check #18512 in the amount of \$35.00 as payment of the same. Your processing of the enclosed accordingly is appreciated.

Should you have any questions, please contact our office at 352-369-8830, extension 1. Thank you for your attention in this matter.

Sincerely,

Thomas J. Dobbins
For Trow & Dobbins, P.A.

TJD/sr

Enclosures: Referenced Herein

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: C & M LIFELINE, INC.

DOCUMENT NUMBER: N06000006890

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

Please return all correspondence concerning this matter to the following:

THOMAS J. DOBBINS, ESQUIRE

Name of Contact Person

TROW & DOBBINS, P.A.

Firm/Company

1301 NE 14th Street

Address

Ocala, Florida 34470

City/State and Zip Code

eservice@ocalalawfirm.com

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

For further information concerning this matter, please call:

Thomas J. Dobbins, Esquire at (352) 369-8830
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 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 C & M LIFELINE, INC.

SECOND: The document number of the corporation (if known) is N06000006890.

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is March 24, 2023.

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.

FOURTH: The revocation of dissolution was authorized on June 5, 2023.

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.

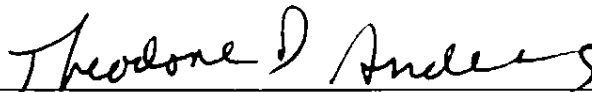
☐ The members revoked the dissolution by resolution adopted by written consent and executed in accordance with s. 617.0701, Florida Statutes.

☒ 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 two (2) and the vote for the resolution was two (2) for and zero (0) against.

☐ The incorporator or majority of the incorporators authorized the dissolution.

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 THEODORE DEAN ANDERS

Title PRESIDENT

FILING FEE \$35

ARTICLES OF DISSOLUTION

Signature: THEODORE DEAN ANDERS PRESIDENT
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative