

N16000005389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

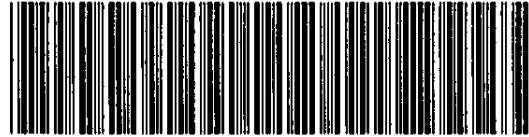
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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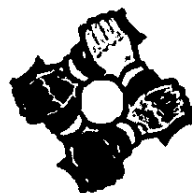
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SAMARITAN PROJECT OF ZEPHYRHILLS



December 12, 2012

To Whom It May Concern:

Enclosed you will find two applications; 1) for filing an amendment to our articles of incorporation, and 2) a request to revoke the dissolution of our organization.

Explanation....human error. I hit the wrong button and was obviously on the wrong site when attempting to file our amendment to our articles. I simply need to amend our articles to include a dissolution clause. We have applied for our 501(c)3 status and this is the only item holding up our favorable approval. I appreciate your attention and assistance in this matter.

I apologize for the confusion.

Respectfully,

Tim Mitchell

Chairman, Samaritan Project of Zephyrhills, Inc. Advisory Board

813-317-4975 (cell)

Samaritan Project of Zephyrhills
PO Box 0985 Zephyrhills, FL. 33539 813-810-8670 (Office) 813-788-4291 (Fax)

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Samaritan Project of Zephyrhills, Inc.

DOCUMENT NUMBER: N10000005389

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

Please return all correspondence concerning this matter to the following:

Tim Mitchell

Name of Contact Person

Samaritan Project of Zephyrhills, Inc.

Firm/Company

PO Box 0985

Address

Zephyrhills, FL 33539

City/State and Zip Code

mirroringthemessage@gmail.com

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

For further information concerning this matter, please call:

Tim Mitchell

Name of Contact Person

at (813) 317-4975

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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 Samaritan Project of Zephyrhills, Inc.

SECOND: The document number of the corporation (if known) is N10000005389

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 12-12-2012

FOURTH: The revocation of dissolution was authorized on 12-10-2012

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 Tim Mitchell

Title Chairman

FILING FEE \$35