

N 11 00000 3889

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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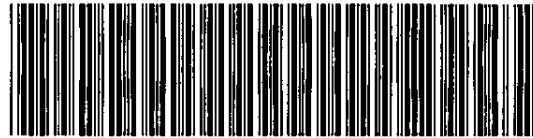
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 25 2014

C. CARROLL

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Hackday Foundation, Inc.  
**DOCUMENT NUMBER:** N11000003889

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

Please return all correspondence concerning this matter to the following:

Juan Pablo Cappello  
Name of Contact Person

Private Advising Group P.A.  
Firm/Company

600 Brickell Ave, 1607  
Address

Miami Beach, FL 33131  
City/State and Zip Code

JPC@JPC.VC  
Email address (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan Cappello at ( 305 ) 7937414  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RECEIVED  
14 AUG 18 PM 2:11  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
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 Hackday Foundation,  
Inc.

SECOND: The document number of the corporation (if known) is N11000003889

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is April 21, 2014

FOURTH: The revocation of dissolution was authorized on May 1, 2014

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 \_\_\_\_\_

Juan Pablo Cappello

Title \_\_\_\_\_

President

FILING FEE \$35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 AUG 19 PM 3:54

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**FILED**  
**Apr 21, 2014**  
**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:  
                    HACKDAY FOUNDATION, INC.

**SECOND:**     The document number of the corporation: N11000003889

**THIRD:**       The date of the meeting of members at which the resolution to dissolve was adopted  
                    April 18, 2014. The number of votes cast by the members was sufficient for approval.

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: DEMIAN BELLUMIO

DIRECTOR

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