

N16000007709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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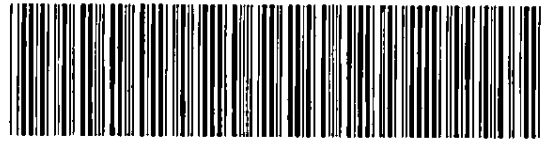
(Business Entity Name)

(Document Number)

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SECURITY
TALLAHASSEE, FL

2023 NOV 20 PM 5:15

FILED

SECURITY
TALLAHASSEE, FL

2023 NOV 20 PM 4:09

RECEIVED

A. BUTLER

NOV 20 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CROSS Our Hearts Inc

DOCUMENT NUMBER: N 16000007709

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

Please return all correspondence concerning this matter to the following:

KEVIN W ISAACS
Name of Contact Person

CROSS OUR HEARTS INC
Firm/Company

142 Windtree Lane
Address

Winter Garden, FL 34787
City/State and Zip Code

theycrossourhearts@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN W ISAACS Sr at (954) 812-5867
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|--|
| <input 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
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 **FILED** 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: 2023 NOV 20 PM 5: 15

FIRST: The name of the corporation is CROSS OUR HEARTS INC
TALLAHASSEE, FL

SECOND: The document number of the corporation (if known) is N16000007709

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

FOURTH: The revocation of dissolution was authorized on 11/20/2023

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 _____ and the vote for the resolution was _____ for and _____ against.

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

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

Signature Kevin W Isaac Sr

(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 KEVIN W ISAACS SR

Title President/CEO

FILED
Nov 14, 2023
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:
CROSS OUR HEARTS, INC.

SECOND: The document number of the corporation: N16000007709

THIRD: The resolution was adopted by written consent of the members and executed in accordance with section 617.0701, Florida Statutes.

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: KEMARI W ISAACS

OWNER / PRESIDENT

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

FILED

2023 NOV 20 PM 5:15

SECRETARY OF STATE
TALLAHASSEE, FL