N18000002350

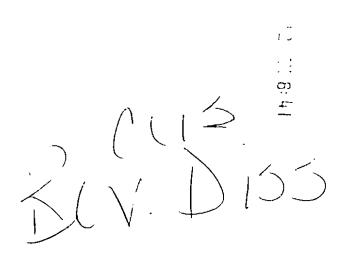
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Name)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Taylor Belle Foundation INC DOCUMENT NUMBER: N1800002350
The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Benjamin Ballard Name of Contact Person
Taylor Belle Foundation INC Firm/Company
142 Summer Wood way Address
TackSonville, FL, 30218 City/State and Zip Code ballard b@taylor b foundation. Org benjamin 22 ballards E-mail address: (to be used for future annual report notification) gravil. Com
For further information concerning this matter, please call:
Benjamin Ballard at (904) 377. 3265 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

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 Taylor Belle Foundation In		
SECOND:	The document number of the corporation (if known) is N18000002350		
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is \(\frac{\(\frac{10}{19}\) \frac{20}{20} \). 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 <u>October 19, 2020.</u>		
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 5		
	(By the chairman of vice chairman of the board, president or other officer, or by an incorporator, or trustee if applicable)		
	Typed or Printed Name Benjamin Ballard 50		
	Title (CED) Chief Executive Officer		

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:

TAYLOR BELLE FOUNDATION, INC.

SECOND:

The document number of the corporation: N18000002350

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 19, 2020.

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 19, 2020

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: BENJAMIN BALLARD

CHIEF EXECUTIVE OFFICER

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