

123 0000 10746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

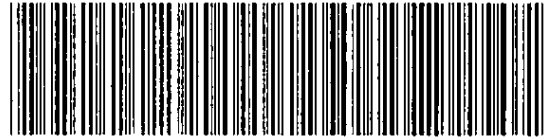
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Spartans Baseball Booster Club, Inc.

DOCUMENT NUMBER: N23000010746

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

Please return all correspondence concerning this matter to the following:

Elizabeth Hernandez
Name of Contact Person

Spartans Baseball Booster Club
Firm/Company

2166 Sw 130th Terr
Address

Miramar FL 33027
City/State and Zip Code

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

CLERK OF STATE
TALLAHASSEE, FL

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For further information concerning this matter, please call:

Elizabeth Hernandez at (786) _____
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|---|--|
| <input checked="" 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 32311

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2115 N. Monroe Street, Suite 210

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 Spartans Baseball Booster Club, Inc.

SECOND: The document number of the corporation (if known) is N23000010746

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 8/20/24

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 8/20/24

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 _____

(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 Elizabeth Hernandez

Title President

SECRETARY OF STATE
TALLAHASSEE, FL

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ARTICLES OF DISSOLUTION

Signature: GIOCONDA REINA PRESIDENT

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