(Re	equestor's Name)		
(Ac	Idress)		
(Ac	ldress)		
(Ci	ty/State/Zip/Phone #	/)	
PICK-UP	☐ WAIT	MAIL MAIL	
(Bı	usiness Entity Name	*)	
(Document Number)			
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			
Special instructions to	Filing Officer:		



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Revocation of Dissolution

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PARK SHORE ASSOCIATES, INC	<u> </u>
DOCUMENT NUMBER: P01000024366	<u>.</u>
The enclosed Articles of Revocation of Dissolution and fee are submitted for the	filing.
Please return all correspondence concerning this matter to the following:	
MARTHA A. WINTERMEYER (Name of Contact Person)	
KILBOURN ASSOCIATES	
(Firm/Company)	
3033 RIVIERA DRIVE, #202 (Address)	
NAPLES, FL 34103 (City/State and Zip Code) For further information concerning this matter, please call:	
to the same than	
MARTHA WINTERMEYER at (239) 261-18 (Name of Contact Person) (Area Code & Daytime T	188 'elephone Number)
Enclosed is a check for the following amount:	
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & \bigcup \\$Certificate of Status \$\text{Certified Copy}\$ (Additional copy is enclosed)	\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CenteTallahassee, FL 323	tions r Circle

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida 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 <u>PARK SHORE ASSOCIATES</u> , <u>INC</u> .
SECOND:	The document number of the corporation (if known) is P01000024366.
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 01/13/2006
FOURTH:	The Revocation of Dissolution was authorized on 01/24/2006 .
FIFTH:	Adoption of Revocation of Dissolution (check one)
	 ☐ The board of directors revoked the dissolution. ☐ The incorporators revoked the dissolution. ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization. ☐ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval. ☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by was sufficient for approval.
SIXTH:	A copy of the Articles of Dissolution is attached. Signature (By Adirector, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	EDMOND MICHAEL KILBOURN (Typed or printed name of person signing)
	DDFCTDFNM

(Title of person signing)

ARTICLES OF DISSOLUTION

Pursuant to articles of d		1401, Florida Statutes, this Florida profit corporation submits the following
FIRST:	The name	of the corporation as currently filed with the Florida Department of State:
	PARK	SHORE ASSOCIATES, INC.
SECOND:	The docum	nent number of the corporation (if known): P01000024366
THIRD:	The file da	te the articles of incorporation: 03/07/2001
FOURTH:	(CHECK	AT LEAST ONE BOX)
		None of the corporation's shares have been issued.
	X	The corporation has not commenced business.
FIFTH:	No debt of	the corporation remains unpaid.
SIXTH:		ets of the corporation remaining after winding up have been distributed holders, if shares were issued.
SEVENTH:	Adopti	on of Dissolution (CHECK ONE)
	X	A majority of the incorporators authorized the dissolution.
		A majority of the directors authorized the dissolution.
Sign	ature:_ (By a din in the ha	Educated Muhael Kubouw ector, president or other officer - if directors or officers have not been selected, by an incomparior - if and of a receiver, trustee, or other court appointed fideciary, by that fiduciary.)
		EDMOND MICHAEL KILBOURN (Typed or printed name of person signing)
		OFFICER (Title of Person Signing)

Filing Fee: \$35