# PCH 000171310

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PICK-UP	WAIT	MAIL.
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Certified Copies	_ Certificates o	f Status
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T. LEWIS

# **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Caloo sa not chee Construction
DOCUMENT NUMBER: PO4000 171310
The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Patrick Zurcher Name of Contact Person
Caloosahatchee Construction Inc
18680 Old Bayshorl Rd
N. Fort Myers, FL 33917  City/State and Zip Code  Phzinca aol. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Patrick Zuroner At (239) 340-5297  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35 Filing Fee Securificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
Mailing Address:  Amendment Section  Division of Corporations  P.O. Box 6327  Street Address:  Amendment Section  Division of Corporations  Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314



### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 9, 2012

PATRICK ZURCHER CALOOSAHATCHEE CONSTRUCTION, INC. 18680 OLD BAYSHORE ROAD N. FORT MYERS, FL 33917

SUBJECT: CALOOSAHATCHEE CONSTRUCTION, INC.

Ref. Number: P04000171310

We have received your document for CALOOSAHATCHEE CONSTRUCTION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

In order to file your document, the subject entity must first be reinstated.

The fees to reinstate the corporation are as follows: \$600 reinstatement fee, \$150.00 filing fee per year for the years 2012 through the current year.

Therefore, the total fee to file the reinstatement is \$1200.00. Add an additional \$8.75 for each certificate of status requested.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 512A00024962

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 2alocsahatchee
	The name of the corporation is <u>Paloc sahatchee</u> <u>Construction</u> , Tuc.
SECOND:	The document number of the corporation (if known) is PO40001713   D
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 6-28-20/2  The Revocation of Dissolution was authorized on 6-28-20/2  Adontion of Revocation of Dissolution (check one)
FOURTH:	The Revocation of Dissolution was authorized on 6.28.2012.
FIFTH:	Adorption of Revocation of Dissolution (check one)
	The board of directors revoked the dissolution.  The incorporators 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.  (Voting group)
SIXTH:	A copy of the Articles of Dissolution is attached.
	Signature  (By a director, 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)  Patrick Zurcher
	(Typed or printed name of person signing)
	President

(Title of person signing)

# Secretary of State

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST:

The name of the corporation as currently filed with the Florida Department of State:

CALOOSAHATCHEE CONSTRUCTION, INC.

SECOND:

The document number of the corporation: P04000171310

THIRD:

The file date of the articles of incorporation: December 22, 2004

FOURTH:

None of the corporation's shares have been issued.

FIFTH:

No debt of the corporation remains unpaid.

SIXTH:

The net assets of the corporation remaining after winding up have been distributed to

the shareholders, if shares were issued.

SEVENTH:

A majority of the incorporators authorized the dissolution.

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: PATRICK H ZURCHER

**PRESIDENT** 

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

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State REINSTATEMENT 24程 OCT 26 PM 4:02 **DIVISION OF CORPORATIONS** SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # P04000171310 1. Corporation Name Caloosh ntchee Construction 3. Mailing Office Address CR2E081 (11/10) Suite, Apt. #, etc. Date Incorporated or Qualified To Do Business in Florida City & State City & State FEI Number Applied For Not Applicable Country \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 7. Name and Address of Current Registered Agent rol 400241324964 10/30/12--01014--004 \*\*1200.00 State 8. It being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Date 10-25-2012 Registered Agent PERED AGENT MUST SIGN Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Titles City / State / Zip 18680 Old Bryshure rd-N-FOOT MYERS FI OCT 3 0 2012 <sup>10.</sup> E-mail Address: 🔽 (To be used for future annual report notification) 11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., and that all fees owed by the corporation have been paid. I further certify, the inforgration indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am awa e that fatse information submitted s a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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