# P05000035071

(ке	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SAALI, INC. NAME OF CORPORATION:		
DOCUMENT NUMBER: P05000035071		
The enclosed Articles of Revocation of Dissolut	tion and fee are submitted	for filing.
Please return all correspondence concerning this	matter to the following:	
KIMBERLY ALI		
Name of (	Contact Person	<del></del>
SAALI INC.		
Firm	/Company	
3032 JODI LANE		
A	ddress	
PALM HARBOR, FL 34684		
City/State	e and Zip Code	
KIMALI@TAMPABAY.RR.COM		
E-mail address: (to be used for	or future annual report notifica	ition)
For further information concerning this matter, p	olease call:	
KIMBERLY ALI	727 480-833	88
Name of Contact Person	Area Code & Dayti	me Telephone Number
Enclosed is a check for the following amount:	/	
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations	Street Address: Amendment Section of Corp	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

# 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:  SAALI INC.
SECOND:	The document number of the corporation (if known) is P05000035071
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution
	filed with the Florida Department of State is
FOURTH:	The Revocation of Dissolution was authorized on
FIFTH:	Adoption of Revocation of Dissolution (check one)
	<ul> <li>□ The board of directors revoked the dissolution.</li> <li>□ 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.</li> <li>□ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.</li> <li>□ The shareholders revoked the dissolution by voting groups - the number of votes cast by</li> </ul>
	(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)  KIMBERLY ALI  (Typed or printed name of person signing)
	CFO, INCORPORATOR
	(Title of person signing)

# Nov 02, 2018 Secretary of State

### ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:

SAALI, INC.

SECOND:

The document number of the corporation: P05000035071

THIRD:

The date dissolution was authorized: November 2, 2018

Effective date of dissolution: November 2, 2018

FOURTH:

Dissolution was approved by the shareholders. The number of votes cast for dissolution

was sufficient for approval.

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: ANAYAT ALI

**SECRETARY** 

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

### FILED Nov 02, 2018 Secretary of State

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

Name of Corporation:
SAALI, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
THIS NOTICE IS SUBMITTED TO DISSOLVE THE CORP.
Mailing address where claims can be sent:
824 CHRISTINA CIRCLE OLDSMAR, FL 34677 US
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
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: ANAYAT ALI
Electronic Signature of the Person Filing