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2020 J. 113 PN 3:50

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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: Dina St Amour, P.A. DOCUMENT NUMBER:_ P05000152954 The enclosed Articles of Revocation of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Dina St Amour Name of Contact Person Dina St Amour P.A. Firm/Company 2233 NW 159 Lane Address Pembroke Pines ,FL .33028 City/State and Zip Code Pacr90@ymail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Dina St Amour Name of Contact Person Enclosed is a check for the following amount: ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

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: Dina St Amour, P.A.		
SECOND:	The document number of the corporation (if known) is P05000152954		
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution		
	filed with the Florida Department of State is October 08, 2019 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 October 19, 2019		
FIFTH:	Adoption 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:	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) (Typed or printed name of person signing)		
	Precident t		
	(Title of person signing)		

Oct 08, 2019 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:

DINA ST AMOUR P.A.

SECOND:

The document number of the corporation: P05000152954

THIRD:

The file date of the articles of incorporation: November 17, 2005

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 directors 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: DINA ST AMOUR

PRESIDENT

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

FILED Oct 08, 2019 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:

DINA ST AMOUR P.A.

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:

THE BUSINESS NO LONGER PROVIDE MEDICAL SERVICES.

Mailing address where claims can be sent:

2233 NW 159 LANE PEMBROKE PINES, FL 33028

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: DINA ST AMOUR

Electronic Signature of the Person Filing