

PD6000011628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

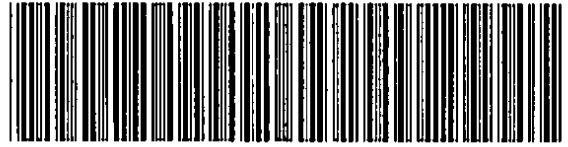
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J DENNIS

JUN 23 2023

Office Use Only



900398934189

06/23/23--01002--007 **52.50

03/22/23

FILED
SECRETARY OF STATE
2023 MAR 22 PM 12:39
STATE OF MISSISSIPPI

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: VOLDEN RENTALS INCORPORATED

DOCUMENT NUMBER: P06000011628

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

Please return all correspondence concerning this matter to the following:

Nitena Kay McGlinn-Volden

Name of Contact Person

Volden Pest Control, Inc.

Firm/Company

322 Interlachen Parkway

Address

Lakeland, FL 33801

City/State and Zip Code

nkvc322@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nitena Volden

Name of Contact Person

At (863) 860-1741

Area Code & Daytime 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
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
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: VOLDEN RENTALS INCORPORATED

SECOND: The document number of the corporation (if known) is P06000011628

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution
filed with the Florida Department of State is 01/13/2023

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.

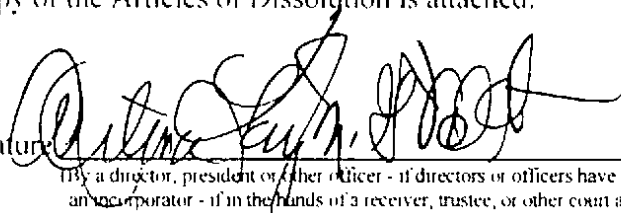
FOURTH: The Revocation of Dissolution was authorized on 03/01/2023

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☒ The board of directors/incorporation 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 was authorized by the shareholders in the manner required by this chapter and by the articles of incorporation.

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)

Ninena Kay Volden

(Typed or printed name of person signing)

Vice President

(Title of person signing)

FILING FEE \$35

ARTICLES OF DISSOLUTION

Signature: NITENA KAY MCGLINN-VOLDEN VICE PRESIDENT
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED
Jan 13, 2023
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:

VOLDEN RENTALS INCORPORATED

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:

CORPORATION SHUT DOWN.

Mailing address where claims can be sent:

**322 INTERLACHEN PKWY
LAKELAND, FL 33801**

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: NITENA KAY MCGLINN-VOLDEN

Electronic Signature of the Person Filing