

# Pol0000063412

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(Address)

(City/State/Zip/Phone #)

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02/07/08--01041--002 \*\*35.00

*revocation of  
diss*

2008 FEB -7 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*2/12/08*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** NITE "N" GALE, INC.

**DOCUMENT NUMBER:** PO6000063412

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

Please return all correspondence concerning this matter to the following:

STEPHEN DWORKOWITZ  
(Name of Contact Person)

NITE "N" GALE, INC  
(Firm/Company)

1950 SOUTH OCEAN DRIVE APT 19 E  
(Address)

NAHANNDALE, FLORIDA 33009  
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHEN DWORKOWITZ at ( 732 ) 688-5406  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF REVOCATION OF DISSOLUTION

FILED

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:

2008 FEB - 9 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FIRST: The name of the corporation is NITE "N" GARE, INC

SECOND: The document number of the corporation (if known) is PO 6000063412

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution  
filed with the Florida Department of State is JAN 20, 2008

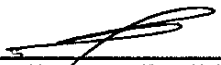
FOURTH: The Revocation of Dissolution was authorized on JAN 18, 2008

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.  
(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)

STEPHEN DWORCOWITZ, SECT.  
(Typed or printed name of person signing)

SECRETARY  
(Title of person signing)

FILING FEE \$35

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

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

NITE "N" GALE, INC.

SECOND: The document number of the corporation (if known): PO 6000063412

THIRD: The file date of the articles of incorporation: MAY 4, 2000

FOURTH: (CHECK AT LEAST ONE BOX)

☐ None of the corporation's shares have been issued.

☒ The corporation has not commenced business.

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: Adoption of Dissolution (CHECK ONE)

☐ A majority of the incorporators authorized the dissolution.

☒ A majority of the directors authorized the dissolution.

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.)

STEPHEN DWORCOWITZ  
(Typed or printed name of person signing)

SECRETARY  
(Title of Person Signing)

Filing Fee: \$35

FILED  
08 FEB -7 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## 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.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: NITE "N" ~~STATE~~ GALE, 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:

NEVER WAS ACTIVE

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

NITE "N" GALE, INC  
1950 S. OCEAN DRIVE APT 19E  
NAHIAN DALE, FL, 33009

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.

STEPHEN DWORKOWITZ

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00**