P0700116226

•
(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:
Special instructions to 1 ming Others.
•
ikaa.

Office Use Only



600316431456

08/01/18--01003--028 **43.75

18 AUG 17 AKII:42

AUG 2 0 2018 S. YOUNG



August 3, 2018

NANCY ZAPPOLA HOLIDAY BABY, INC 15 SEASIDE DRIVE SOUTH COURT KEY WEST, FL 33040

SUBJECT: HOLIDAY BABY, INC. Ref. Number: P07000116226

We have received your document for HOLIDAY BABY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 218A00016018

COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
SUBJECT: Dissolution of Corportation 7 (potocollo226 Document number DOCUMENT NUMBER: (218 A00016019 letter #)
DOCUMENT NUMBER: (218 AUGO1601) [eller #)
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nancy ZAPPOLA (Name of Contact Person)
Holiday Basy. Frc (Firm/Company)
15 Staside Onive South Court
(Address)
(City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
Nancy ZAPPOUA at (305) 923-1476 (Name of Contact Person) (Area Code & Daytime Telephone Number)
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 (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, Fl. 32301

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:	
	Itoliday BARY, Inc.	
SECOND:	The document number of the corporation (if known): PO 700011622 6	
THIRD:	The file date of the articles of incorporation: OC+ 33, 2007	
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.	:
	Adoption of Dissolution (CHECK ONE) All ASSEE TO A majority of the incorporators authorized the dissolution. A majority of the directors authorized the dissolution.	i
Sign	(By a director, president or other officer - Hedrectors 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.)	
	Nancy 2APPAA (Typed or printed name of person signing)	
	Président (Title of Person Signing)	

Filing Fee: \$35