P08000054440

(Re	equestor's Name)		
(Ac	ldress)		
(Ac	ldress)		
(Ci	ty/State/Zip/Phone	÷#)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			





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03/07/13--01016--021 **35.00

12 Mar - 17 FM O- NA

ROV. OFD155

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Complete Aut o Repair Shop INCI DOCUMENT NUMBER: PO800054440
The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Renee Lewis Name of Contact Person
Complete Auto Repair Shop Inc
11536 Wils Road
Coral Springs IF1 33076 City/State and Zip Code
reneemarle Lewis C Yahoo.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Renge Lewis At (954) 325-8095 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$35 Filing Fee Certificate of Status S43.75 Filing Fee 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 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:			
Com	plete Auto Repair Shop Inc			
SECOND:	The document number of the corporation (if known) is $\frac{2080000544490}{100000000000000000000000000000000000$			
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is $\frac{2-13-13}{2-13}$.			
FOURTH:	The Revocation of Dissolution was authorized on $2-19-13$.			
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. 			
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) Renee Lewis (Typed or printed name of person signing) President (Title of person signing)			

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:		
	Complete Auto Repair Shop Inc		
SECOND:	The document number of the corporation (if known): PDRDDDD5 L	1440	
THIRD:	The file date of the articles of incorporation: $06/03/200$		
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 distribute to the shareholders, if shares were issued.	ited	
SEVENTH:	: Adoption of Dissolution (CHECK ONE)	10 TO F	
	☐ A majority of the incorporators authorized the dissolution.	EB -6	
	A majority of the directors authorized the dissolution.	FEB -8 PH 4: 2h	
Sign	(By a director, president or other officer - if directors or officers have not been selected, by an incoming the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)		
	Renee Lewis (Typed or printed name of person signing) President (Title of Person Signing)		

Filing Fee: \$35