

PORT 000068187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

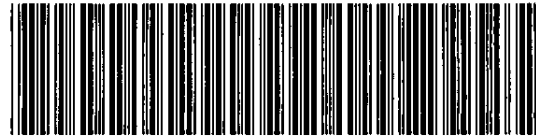
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



800248518368

Rev. Diss

JUN 17 2013

R. WHITE

RECEIVED
DEPARTMENT OF STATE
13 JUN 17 AM 10:48

FILED
13 JUN 17 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 689845 4323109
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 185.00

ORDER DATE : June 14, 2013

ORDER TIME : 9:10 AM

ORDER NO. : 689845-005

CUSTOMER NO: 4323109

DOMESTIC FILINGS

NAME: ANNIE & IGOE, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - Ext# 52956

EXAMINER'S INITIALS _____

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: ANNIE & IGOE, INC.

SECOND: The document number of the corporation (if known) is P09000068187

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 05/09/2013

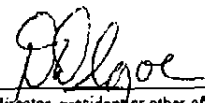
FOURTH: The Revocation of Dissolution was authorized on 06/13/2013

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)

DEBORAH IGOE

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE \$35

FILED
JUN 17 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOR PROFIT CORPORATION ANNUAL REPORT

For Office Use Only
DO NOT WRITE IN THIS SPACE

DOCUMENT # P09000068187 1. Entity Name <p style="text-align: center;">ANNIE & IGOE, INC.</p>			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business - No P.O. Box # 119 WESTMINSTER ROAD Suite, Apt. #, etc.		3. Mailing Address 119 WESTMINSTER ROAD Suite, Apt. #, etc.	
City & State WEST PALM BEACH FL		City & State WEST PALM BEACH FL	
Zip 33045-1648	Country US	Zip 33045-1648	Country US
4. FFI Number 27-1027140		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent			
Name Deborah Igoe			
Street Address (P.O. Box Number is Not Acceptable)			
119 WESTMINSTER ROAD			
City WEST PALM BEACH FL Zip 33045-1648			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.			
SIGNATURE:			Date: June 14, 2013
January 1 - May 1 Fee is \$160.00 After May 1, Fee is \$550.00 Antecedent AR is \$81.25 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Deborah Igoe 119 Westminster Road, West Palm Beach FL 33045-1648		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVTS Glatts, Anne 2 Concord Crossing Lane, Chadds Ford PA 19317-8953		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the executor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.			
SIGNATURE:		Deborah Igoe, President 561.478.2015	

(((H13000105038 3)))

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:
ANNIE & IGOE, INC.

SECOND: The document number of the corporation (if known): **P09000068187**

THIRD: The date dissolution was authorized: **April 24, 2013**

Effective date of dissolution if applicable: **December 31, 2012**

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statements must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: *Deborah Igooe*

(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)

Deborah Igooe

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35

(((H13000105038 3)))

FILED
13 MAY - 9 PM 3:31