

PO9000070077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

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2016 FEB -4 AM 5:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

FEB 05 2016
C. CARROTHERS

January 27, 2016

Attention: Cathy Carrothers

RE: **Sarante Sarante P.A. (name currently being changed to Samfree Sarante, CPA, P.A.)**
Florida Document No. P09000070077
EIN No. 27-0769091

Ms. Carrothers, you and I spoke on Wednesday, January 27, 2016. You suggested I write a simple note reminding you that:

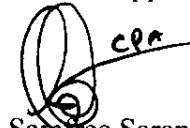
1. The Corporation was Dissolved on December 2, 2015
2. I filed an amendment on January 20, 2016 to change the corporate name to: ***Samfree Sarante, CPA, P.A.*** (the \$35 was already paid).
3. You had to reject the January 20, 2016 name change amendment because of the December 2, 2015 dissolution.

I have attached the revocation of the dissolution and the \$35 fee so you could help me:

1. Revoke the dissolution of Sarante Sarante, PA, then
2. Amend the name to Samfree Sarante, CPA, P.A.

If you have any questions or concerns regarding this matter, I may be contacted at 786-556-4833.

Sincere Appreciation,

A handwritten signature in black ink, appearing to read "Samfree Sarante, CPA", with a stylized flourish.

Samfree Sarante, CPA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Sarante Sarante P.A.

DOCUMENT NUMBER: P09000070077

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

Please return all correspondence concerning this matter to the following:

Samfree Sarante

Name of Contact Person

Sarante Sarante P.A. (Name is currently being changed to Samfree Sarante, CPA, P.A.)

Firm/Company

1585 West 77th. Street

Address

Hialeah, Florida 33014

City/State and Zip Code

Samf1585@gmail.com

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

For further information concerning this matter, please call:

Samfree Sarante

Name of Contact Person

At (786) 556-4833

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
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: Sarante Sarante P.A. (Name is currently being changed to Samfree Sarante, CPA, P.A.)

SECOND: The document number of the corporation (if known) is P09000070077.

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 12/02/2015.

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 1/20/2016

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)

Samfree Sarante, CPA

(Typed or printed name of person signing)

P

(Title of person signing)

FILING FEE \$35

