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# **COVER LETTER**

TO: Amendment Section **Division of Corporations** NAME OF CORPORATION: Shannock Shows and anusence to inc DOCUMENT NUMBER: P1 0000 60 728 The enclosed Articles of Revocation of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: colin O'Keeff Firm/Company For further information concerning this matter, please call: Enclosed is a check for the following amount: □ \$35 Filing Fee \$52.50 Filing Fee, □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed) **Mailing Address: Street Address:** Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

# 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: Shancock Shows and		
anu	Seneits inc		
SECOND:	The document number of the corporation (if known) is PH (XXXX)60128		
ГHIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is July 19-2011.		
FOURTH:	The Revocation of Dissolution was authorized on Feb 12th 2013.		
FIFTH:	Adoption of Revocation of Dissolution (check one)		
SIXTH:	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.  Corporation was voluntary disolved by marthur. 2rd persons  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)  Colo Okeefe  (Typed or printed name of person signing)		
	Ceo/President (Title of person signing)		

# Secretary of State

# ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST:

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

SHAMROCK SHOWS & AMUSEMENTS INC.

SECOND:

The document number of the corporation: P11000060728

THIRD:

The file date of the articles of incorporation: July 1, 2011

FOURTH:

None of the corporation's shares have been issued.

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:

A majority of the incorporators authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: COLIN OKEEFE

PRESIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

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### FILED Feb 12, 2013 Secretary of State

# **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.

Name of Corporation:

SHAMROCK SHOWS & AMUSEMENTS 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:

NO LONGER DOING BUSINESS

Mailing address where claims can be sent:

9903 BAY DRIVE GIBSONTON, FL 33534 US

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: COLIN OKEEFE

Electronic Signature of the Person Filing