

P12000051652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

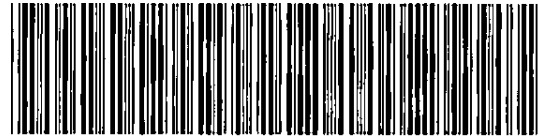
(Document Number)

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2023 JUL -5 AM 8:14

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07/05/23--01001--006 **43.75



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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SONMASTERS TRANSPORTATION CORP.

DOCUMENT NUMBER: P12000051652

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

Please return all correspondence concerning this matter to the following:

SONIA MORGAN

Name of Contact Person

SONMASTERS TRANSPORTATION CORP

Firm/Company

1717 MASON AVE SUIT 1322

Address

DAYTONA BEACH, FL 32117

City/State and Zip Code

SONMASTERS2@YAHOO.COM

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

For further information concerning this matter, please call:

SONIA MORGAN

Name of Contact Person

954

652 9903

At ()

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 enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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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: SONMASTERS TRANSPORTATION

SECOND: The document number of the corporation (if known) is P12000051652

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 06/06/2023.
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.

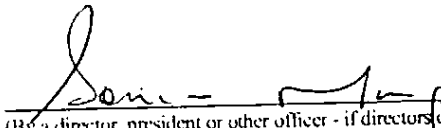
FOURTH: The Revocation of Dissolution was authorized on _____

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☐ The board of directors/incorporation 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 was authorized by the shareholders in the manner required by this chapter and by the articles of incorporation.

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)

SONIA MORGAN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

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HALL COUNTY CLERK

FILING FEE \$35