

P12000057627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

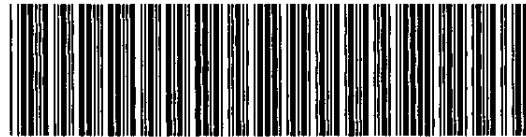
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/08/12--01018--003 **35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
12 OCT -8 PM 2:51

Rev. of Diss.

OCT 10 2012

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JOCO ACTIVES INCORPORATED

DOCUMENT NUMBER: P12000057627

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

Please return all correspondence concerning this matter to the following:

STAGEMAN, RONALD K

Name of Contact Person

JOCO ACTIVES INCORPORATED

Firm/Company

3201 East Crystal Lake Ave.

Address

Orlando, FL 32806

City/State and Zip Code

rugbumperfl@yahoo.com

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

For further information concerning this matter, please call:

Ronald Stageman

Name of Contact Person

At (321) 332-2167

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 JOCO ACTIVES INCORPORATED

SECOND: The document number of the corporation (if known) is P12000057627

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 09/06/2012

FOURTH: The Revocation of Dissolution was authorized on 09/06/2012

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)

Ronald K Stageman

(Typed or printed name of person signing)

President

(Title of person signing)

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SECRETARY OF CORPORATION
12 OCT -8 PM 2:51

FILING FEE \$35

FILED
Sep 06, 2012
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:
JOCO ACTIVES INCORPORATED
- SECOND: The document number of the corporation: P12000057627
- THIRD: The file date of the articles of incorporation: June 27, 2012
- FOURTH: 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 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: RONALD STAGEMAN

PRESIDENT

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

FILED
Sep 06, 2012
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:

JOCO ACTIVES INCORPORATED

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:

NEED LLC NOT INC

Mailing address where claims can be sent:

808 YATES ST
ORLANDO, FL 32804

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: RONALD STAGEMAN

Electronic Signature of the Person Filing