P12000090752

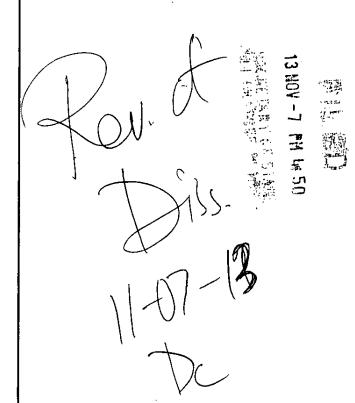
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COVER LETTER

TO: Amendment Section Division of Corporations	r	
NAME OF CORPORATION:	Press, Inc	
DOCUMENT NUMBER: <u>P 12 0000 90</u>	762	
The enclosed Articles of Revocation of Dissolut	tion and fee are submitted for	r filing.
Please return all correspondence concerning this	matter to the following:	
Kany Chestney Name of		
Name of (Contact Person	
Southwest Press, Inc		
Firm	/Company	
2129 Andrea Lane		
	ddress	
Fort Hyers, FL 339/2	and Zin Code	
Fort Hyers, FL 339/2 City/State nchestney @ Swdirect.com E-mail address: (to be used to	and zip code	
E-mail address: (to be used fo	r future annual report notification)
For further information concerning this matter, p	please call:	
Hany Chestney Name of Contact Person	At (<u>289</u>) <u>168-</u> 9 Area Code & Daytime 7	9088 X22 Felephone Number
Enclosed is a check for the following amount:		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 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	Street Address: 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: Northwest Piess, Inc.
SECOND:	The document number of the corporation (if known) is <u>P12000090752</u>
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is _/0-18-2013
FOURTH:	The Revocation of Dissolution was authorized on
FIFTH:	Adoption of Revocation of Dissolution (check one)
	 ☐ 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.
SIXTH:	A copy of the Articles of Dissolution is attached. Signature Allong Overland (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if it the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) Attack D. Carent (Typed or printed name of person signing)
	(Title of person signing)

Oct 18, 2013 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:

SOUTHWEST PRESS, INC.

SECOND:

The document number of the corporation: P12000090752

THIRD:

The date dissolution was authorized: October 18, 2013

FOURTH:

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

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: ANTHONY D. CORRENTI

PRESIDENT

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

FILED Oct 18, 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:

SOUTHWEST PRESS, 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:

PROOF OF SERVICES

Mailing address where claims can be sent:

2129 ANDREA LANE FORT MYERS, FL 33912 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: ANTHONY D. CORRENTI

Electronic Signature of the Person Filing