

PI4 00000 1941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

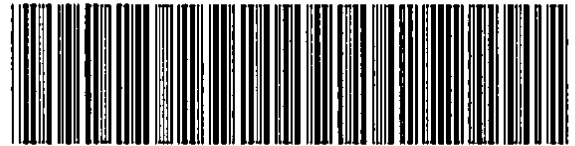
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200377022532

*Revocation of
dissolution*

12/02/21--01010--010 **52.50

2021 DEC 29 PM 12 31
OFFICE OF STATE
CLERK

FILED

A. RAMSEY

DEC 29 2021

X00789, 00524 00071

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Bugs Exterminators Termite & Pest Control
DOCUMENT NUMBER: P1400001941

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

Please return all correspondence concerning this matter to the following:

Felix Strong Sr.

Name of Contact Person

Bugs Exterminators Termite & Pest Control Inc.

Firm/Company

3520 W. Broward Blvd, Suite 112

Address

Fort Lauderdale, Florida 33312

City/State and Zip Code

strongff@bellsouth.net

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

For further information concerning this matter, please call:

Felix Strong

Name of Contact Person

At (954) 297-0608

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2021 DEC 29 AM 10:55

December 20, 2021

FELIX STRONG SR
BUGS EXTERMINATORS TERMITE & PEST
3520 W. BROWARD BLVD, SUITE 112
FORT LAUDERDALE, FL 33312 US

SUBJECT: BUGS EXTERMINATORS TERMITE & PEST CONTROL INC.
Ref. Number: P14000001941

We have received your document for BUGS EXTERMINATORS TERMITE & PEST CONTROL INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please sign the revocation of dissolution form in the space provided at the bottom of the page.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 421A00030507

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:

Bugs Exterminators Termite & Pest Control Inc.

SECOND: The document number of the corporation (if known) is P14000001941

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution

filed with the Florida Department of State is 10-17-2021

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.

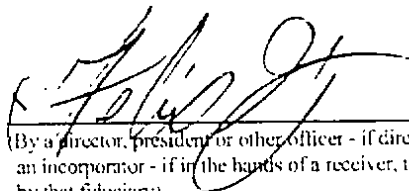
FOURTH: The Revocation of Dissolution was authorized on 11-26-2021

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)

Felix Strong

(Typed or printed name of person signing)

CEO / President

(Title of person signing)

FILING FEE \$35

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:
BUGS EXTERMINATORS TERMITE & PEST CONTROL INC.
- SECOND: The document number of the corporation: P14000001941
- THIRD: The file date of the articles of incorporation: January 7, 2014
- 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, if any, have been distributed.
- SEVENTH: A majority of the incorporators or directors 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: LEONARD DUPONT P

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

FILED
Oct 17, 2021
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:

BUGS EXTERMINATORS TERMITE & PEST CONTROL 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:

OWNER PASSED AWAY

Mailing address where claims can be sent:

3520 W BROWARD BLVD
112
FORT LAUDERDALE, FL 33312

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: LEONARD DUPONT

Electronic Signature of the Person Filing