

PI4000081523

(Requestor's Name)

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(Business Entity Name)

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JAN 25 2016
TALLAHASSEE, FLORIDA

FILED
JAN 25 2016

REV
D-5
JAN 27 2016

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ARMOUR MARKETING, INC
DOCUMENT NUMBER: P14000081523

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

Please return all correspondence concerning this matter to the following:

BEN BARNETT - PRESIDENT
Name of Contact Person

ARMOUR MARKETING, INC
Firm/Company

405 S. DALE MARTY STE 402
Address

TAMPA, FL 33609
City/State and Zip Code

ben.barnett@mc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BEN BARNETT At (813) 404-4676
Name of Contact Person 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: ARMOUR MARKETING, INC

SECOND: The document number of the corporation (if known) is P14000081523

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

filed with the Florida Department of State is 1/19/16.

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 1/19/16

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)

BEN BARNETT

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE \$35

ARTICLES OF DISSOLUTION

Signature: BEN A. BARNETT PRESIDENT
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED
Jan 19, 2016
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:

ARMOUR MARKETING, 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:

12/15/16

Mailing address where claims can be sent:

405 S. DALE MABRY
SUITE 402
TAMPA, FL 33609

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: BEN A. BARNETT

Electronic Signature of the Person Filing