

PI8000050033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

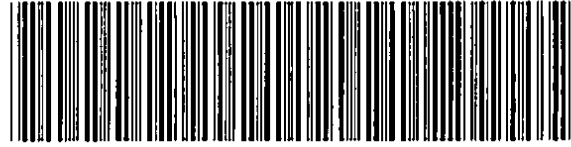
(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

MELLOW ENTERPRISES KEY WEST, INC

**NAME OF CORPORATION:** \_\_\_\_\_

P18000050033

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

ROBERT OLIVERIO

\_\_\_\_\_  
Name of Contact Person

MELLOW ENTERPRISES KEY WEST, INC

\_\_\_\_\_  
Firm/Company

327 ELIZABETH STREET

\_\_\_\_\_  
Address

KEY WEST, FL 33040

\_\_\_\_\_  
City/State and Zip Code

mellowventureskeywest@gmail.com

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

For further information concerning this matter, please call:

BETSY CROTEAU

305

304-8693

At (\_\_\_\_\_) \_\_\_\_\_

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

## 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:

MELLOW ENTERPRISES KEY WEST, INC.

FIRST: The name of the corporation is: \_\_\_\_\_

P18000050033

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

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution  
9/13/2023

filed with the Florida Department of State is \_\_\_\_\_

**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.

9/13/2023

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)

ROBERT OLIVERIO

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

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FILING FEE \$35

Signature: ROBERT OLIVERIO PRESIDENT  
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative