PRO 0000 78-730

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Rev. Diss.

2020 JUL 22 PC:

AUG 1 4 2020

D COMNELL

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: DLPT		s Corp
DOCUMENT NUMBER: P1800007	8730	
The enclosed Articles of Revocation of Dissoluti	ion and fee are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Catysha Dorcely Name of G	ontact Person	
I ax Pr	e paration	
2700 W Atlantic	blid Suite#2	00
Pompano Beach T	FC 33069 and Zip Code	
Catysta clor cely & E-mail address: (to be used for	future annual report notification)	
For further information concerning this matter, pl	lease call:	
Catysha Dacaly Name of Contact Ferson	At (754) 217-995 Area Code & Daytime Telephone	Number
Enclosed is a check for the following amount:		
\$35 Filing Fee	(Additional copy is Certified	ate of Status &
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: The name of the corporation is: DEP Tax Multi-Services COIP FIRST: The document number of the corporation (if known) is \$\rightarrow\\$00007\\$730 SECOND: THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is Ol 12020. 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. The Revocation of Dissolution was authorized on Ob 1201201 FOURTH: Adoption of Revocation of Dissolution (check one) FIFTH: 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 4f in the hands of a receiver, trustee, or other court appointed fiduciary. by that fiduciary)

FILING FEE \$35



ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

The name of the corporation as currently filed with the Florida Department of State: FIRST:

D & P TAX MULTI-SERVICES CORP

The document number of the corporation: P18000078730 SECOND:

The date dissolution was authorized: April 21, 2020 -THIRD:

Effective date of dissolution: June 1, 2020

Dissolution was approved by the shareholders in the manner required by this chapter and by Articles of Incorporation. FOURTH:

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.

PRESIDENT Signature: CATYSHA DORCELY

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

FILED Apr 21, 2020 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:

. . .

D & P TAX MULTI-SERVICES CORP

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:

BOTH PARTNERS WILL NO LONGER BE IN BUSINESS.

Mailing address where claims can be sent:

2700 W ATLANTIC BLVD SUITE 200 POMPANO BEACH, FL 33069

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: CATYSHA DORCELY

Electronic Signature of the Person Filing