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(Re	questor's Name)	
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		MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	



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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	Astrid de Parry, P.A.
DOCUMENT NUMBER:	P93000037947
The enclosed Articles of Revoca	tion of Dissolution and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
Astrid de Parry	
	Name of Contact Person
Astrid de Parry, P.A.	
	Firm/Company
107 E. Church Street	
	Address
DeLand, FL 32724	
	City/State and Zip Code
email@delandattorney.com	
E-mail addi	ress: (to be used for future annual report notification)
For further information concerni	ng this matter, please call:
Astrid de Parry	At () 736-1223
Name of Contact P	Person Area Code & Daytime Telephone Number
Enclosed is a check for the follow	wing amount:
	75 Filing Fee & Image: \$43.75 Filing Fee & Image: \$52.50 Filing Fee, \$52.50 Filing Fee, \$6000 Certificate of Status & ificate of Status Certified Copy \$6000 (Additional copy is enclosed) Certified Copy \$6000 (Additional copy is enclosed)
<u>Mailing Address:</u> Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

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:

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FIRST:	Astrid de Parry, P.A. The name of the corporation is:			
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			
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 			
SIXTH:	A copy of the Articles of Dissolution is attached.			
	Signature Control of the control of			
	(Title of person signing)			



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: ASTRID DE PARRY, P.A.

- SECOND: The document number of the corporation: P93000037947
- THIRD: The date dissolution was authorized: August 27, 2018 Effective date of dissolution: September 1, 2018
- 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: ASTRID DE PARRY

PRESIDENT

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