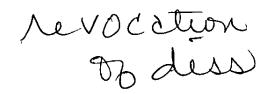
# P93000066699

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(During Falika Nama)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

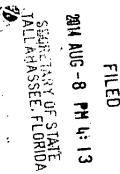
Office Use Only



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8/18/14

# **COVER LETTER**

Division of C				
NAME OF CORPOR	ration: PROVI	DENCE INT	ERNATIONAL, M	
	CUMENT NUMBER: P9300066699			
The enclosed Articles	of Revocation of Dissolu	tion and fee are submitted	d for filing.	
Please return all corres	spondence concerning this	matter to the following:		
<u> </u>	IDAR H. RI Name of	ZVI Contact Person		
Pro	VIDENCE INT	ERNATIONAL /Company	Ne	
184	4 N. NOB	HILL ROA	D, #425	
PLAI	YTATION, City/State	F LORI DA and Zip Code	33322	
IKER	CZVI @ GMAIL E-mail address: (to be used for	. COM	ation)	
	n concerning this matter, p		ucon)	
1KTIDAR Name	14. R12V1	At (_239)6 Area Code & Dayti	91 - 1739 me Telephone Number	
	r 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		Street Address: Amendment Section Division of Corporations		

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF REVOCATION OF DISSOLUTION

FILED Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Artistes of Dissolution prior to the expiration of 120 days following the effective date (or file date.) of the Articles of Dissolution: The name of the corporation is: PROVIDENCE INTER FIRST: The document number of the corporation (if known) is P93000066699 SECOND: The effective date (or file date, if no effective date) of the Articles of Dissolution THIRD: filed with the Florida Department of State is \_\_\_ Jwly 31,2014 The Revocation of Dissolution was authorized on AUSUST 2, 2014 FOURTH: 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) A copy of the Articles of Dissolution is attached. SIXTH: 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)

**FILING FEE \$35** 

(Title of person signing)

PRESIDENT

# Jul 31, 2014 Secretary of State

### 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:

PROVIDENCE INTERNATIONAL, INC.

SECOND:

The document number of the corporation: P93000066699

THIRD:

The date dissolution was authorized: July 31, 2014

Effective date of dissolution: July 31, 2014

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: IKTIDAR H RIZVI

**PRESIDENT** 

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

### FILED Jul 31, 2014 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:

PROVIDENCE INTERNATIONAL, 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:

THE COMPANY IS NO LONGER DOING ANY BUSINESS

Mailing address where claims can be sent:

1844 N NOB HILL ROAD PLANTATION, FL 33936 FL

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: IKTIDAR H RIZVI

Electronic Signature of the Person Filing