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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates of	Status
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Special Instructions to	Filing Officer:	





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Revocation of Dissolution
TB 8/6/08

COVER LETTER

•	TO: Amendment Section Division of Corporations
	NAME OF CORPORATION: J.M VIGUE INSURANCE AGENCY INC
	DOCUMENT NUMBER: P 95 00091660
	The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	JAMES CHARLES VIGUE (Name of Contact Person)
	(Name of Contact Person)
	JIM VIGUE INSURANCE AGENCY INC (Firm/Company)
	8855 Commodure DR (Address)
	SEMINULE, FL 33776 (City/State and Zip Code)
	For further information concerning this matter, please call:
	JAMES CHARLES VIGUE at (727) 595-1928 (Name of Contact Person) (Area Code & Daytime Telephone Number)
	Enclosed is a check for the following amount:
	\$35 Filing Fee \$43.75 Filing Fee & \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF REVOCATION OF DISSOLUTION

Dissolution	section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of prior to the expiration of 120 days following the effective date (or file date, if no effective date) of of Dissolution:
FIRST:	The name of the corporation is JIM VIGUE INSURANCE AGENCY, INC.
SECOND:	The document number of the corporation (if known) is $\underline{P9500001160}$.
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is July 11, 2008
FOURTH:	The Revocation of Dissolution was authorized on <u>July 24, 2008</u> .
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.
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 historporator - if in the hands of a resciver, trustee, or other court appointed fiduciary, by that fiduciary) Tames Cylque (Typed or printed name of person signing)
	PRESIDENT
	(Title of person circuing)

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	JIM VIGUE INSURANCE AGENCY, INC.
SECOND:	The document number of the corporation (if known): P9500091660
THIRD:	The file date the articles of incorporation: DECEMBER 1, 1995 (CHECK AT LEAST ONE BOX)
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
•	☐ The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
	·
Sign	(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.)
	James Warles VIAUE (Typed or printed name of person signing)
	DIRECTOR (Title of Person Signing)