95000095491

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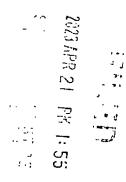
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COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: FIGRIDA	AFFORDAble	LIVE-INS, INC.
DOCUMENT NUMBER: P95000	95491	
The enclosed Articles of Revocation of Dissolution		for filing.
Please return all correspondence concerning this n	natter to the following:	
UINCE KINSLE	R	
Name of C	ontact Person	
FLORIDA AFFORDAG	RIE LINE-INS,	エルく、
Firm/C	Company	
16 Jolyan DRI	UE	
Ac	ddress	
ORMOND DEACH	1, FL 32174	ł
City/State	and Zip Code	
YOVINN457@A	to1.com	
E-mail address: (to be used for	r future annual report notifica	tion)
For further information concerning this matter, p	lease call:	
VINCE KINSLER	A1(386) 87	1-3878
Name of Contact Person	Area Code & Dayti	me 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:	Street Address:	tion
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	

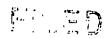
Tallahassee, FL 32303

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:

FIRST:	The name of the corporation is: FLORIDA HERORDABLE	LIVE-INS, INC		
SECOND:	The document number of the corporation (if known) is P95000	095491		
THIRD:	e effective date (or file date, if no effective date) of the Articles of Dissolution			
	filed with the Florida Department of State is 1/04/2033 Note: If the date inserted in this block does not meet the applicable statutory filing rout be listed as the document's effective date on the Department of State's records.	equirements, this date will		
FOURTH:	The Revocation of Dissolution was authorized on 4/14/2023	<u>.</u>		
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 shar revocation was permitted by action by the board of directors alone pure authorization. The shareholders revoked the dissolution and was authorized by the smanner required by this chapter and by the articles of incorporation. 	irsuant to that		
SIXTH:	A copy of the Articles of Dissolution is attached.	2023 Sec.		
	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 (iduciary, by that fiduciary)	(E)		
	Uince Kinsler (Typed or printed name of person signing)	1:55		
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

FILING FEE \$35



ARTICLES OF DISSOLUTION

2023 JAN -4 AM 7: 16

Pursuant to section 607.1403. Florida Statutes, this Florida profit corporation submits the following articles TALE: PASEE, FL The name of the corporation as currently filed with the Florida Department of State: FIRST: FLORIDA AFFORONDE LIVE-INS, INC. The document number of the corporation (if known): P9500095491 SECOND: The date dissolution was authorized: 121112022 THIRD: Effective date of dissolution if applicable: 12/31/2022

(no more than 90 days after dissolution file date) 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. Dissolution was approved by the shareholders, in the manner required by this chapter and FOURTH: the articles of incorporation. (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 VINCERT KINSLER (Typed or printed name of person signing) PRESIDENT

Filing Fee: \$35