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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 4, 2018

CASHEL TRAVERSO 2633 WULFERT RD SANIBEL, FL 33957

SUBJECT: TRAVERSO & ASSOCIATES, INC. Ref. Number: P96000021795

We have received your document for TRAVERSO & ASSOCIATES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The revocation of dissolution must be adopted in the same manner as the articles of dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 118A00000260

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: TRAVERSO + ASSOCIATES, INC	,.
DOCUMENT NUMBER: <u>P9600021795</u>	

The enclosed Articles of Revocation of Dissolution and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CASHEL TRAVERSO Name of Contact Person TRAVERSO & ASSOC, INC. Firm/Company 2633 WULFERT RD ANIBEL FL 33957 City/State and Zip Code KTRAVERSO OVIPREALTY, COM E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call;



Enclosed is a check for the following amount:

S35 Filing Fee S43.75 Filing Fee & Certificate of Status

S43.75 Filing Fee & Certified Copy

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

(Additional copy is enclosed)

□ \$52.50 Filing Fee. Certificate of Status & Certified Copy (Additional copy is enclosed)

Street Address:

Amendment Section **Division of Corporations Clifton Building** 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607:1404, Elorida 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:
	RAVERSO + ASSOCIATES, INC.
SECOND:	The document number of the corporation (if known) is <u>P96000021795</u>
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution
	filed with the Florida Department of State is $12 - 27 - 19$. <u>Note:</u> 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.
FOURTH:	The Revocation of Dissolution was authorized on $12 \cdot 28 \cdot 17$.
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
	(Voting group) was sufficient for approval.
SIXTH:	A copy of the Articles of Dissolution is attached.
	Signature

an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

 $\frac{CASHEL J TRAVERSO}{(Typed or printed name of person signing)}$

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FILING FEE \$35



ARTICLES OF DISSOLUTION

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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: TRAVERSO & ASSOCIATES, INC.
- SECOND: The document number of the corporation: P96000021795

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- THIRD: The date dissolution was authorized: December 27, 2017 Effective date of dissolution: December 27, 2017
- 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: CASHEL J. TRAVERSO PRESIDENT Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative