

P97000015861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

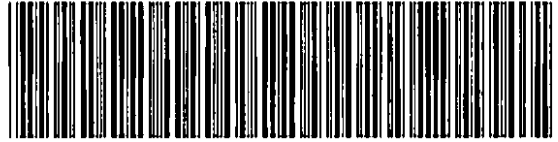
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
JUN 10 2 55 PM '21

JUN 2 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Crew Call, Inc.

DOCUMENT NUMBER: P97000015861

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

Please return all correspondence concerning this matter to the following:

John Alonzo
Name of Contact Person

Crew Call Inc.
Firm/Company

4630 S. Kirkman Rd. #188
Address

Orlando FL 32811
City/State and Zip Code

john@crewcallinc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Alonzo At (407) 363.9055
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed) |
|--|---|--|--|

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

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
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: Crew Call, Inc.

SECOND: The document number of the corporation (if known) is P97000015861

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is April 5, 2021.
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.

FOURTH: The Revocation of Dissolution was authorized on May 4, 2021

- 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 shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
 - The shareholders revoked the dissolution and was authorized by the shareholders in the manner required by this chapter and by the articles of incorporation.

SIXTH: A copy of the Articles of Dissolution is attached.

Signature *John Alonzo*
(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)

John Alonzo
(Typed or printed name of person signing)

owner / president
(Title of person signing)

FILED
MAY 11 2021
PM 2:55
TALLAHASSEE

FILING FEE \$35

FILED
Apr 05, 2021
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:

CREW CALL, 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:

BUSINESS HAS CEASED

Mailing address where claims can be sent:

150 PURCHASE STREET
SUITE 9
RYE, NY 10580 UN

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: ALDO V VITAGLIANO

Electronic Signature of the Person Filing