

P05000035071

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

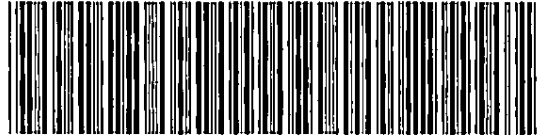
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900320982549

11/19/18--01029--011 **43.75

FILED
2018 NOV 19 PM 3:24
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

CC
Gen. of DISS

DEC 03 2018
I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SAALI, INC. _____

DOCUMENT NUMBER: P05000035071 _____

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

Please return all correspondence concerning this matter to the following:

KIMBERLY ALI

Name of Contact Person

SAALI INC.

Firm/Company

3032 JODI LANE

Address

PALM HARBOR, FL 34684

City/State and Zip Code

KIMALI@TAMPABAY.RR.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KIMBERLY ALI _____ At (727) 480-8388

Name of Contact Person

Area Code & Daytime 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:

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

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, 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: SAALI INC.

SECOND: The document number of the corporation (if known) is P05000035071

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 11/2/18
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 11/08/18

FIFTH: Adoption of Revocation of Dissolution (check one)

- checkboxes for: 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 [blank] was sufficient for approval.

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

Signature [Handwritten 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)
KIMBERLY ALI
(Typed or printed name of person signing)
CFO, INCORPORATOR
(Title of person signing)

FILED
2018 NOV 19 PM 3:24
STATE OF FLORIDA
DEPARTMENT OF STATE

FILED
Nov 02, 2018
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:
SAALI, INC.
- SECOND:** The document number of the corporation: P05000035071
- THIRD:** The date dissolution was authorized: November 2, 2018
Effective date of dissolution: November 2, 2018
- 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: ANAYAT ALI

SECRETARY

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

FILED
Nov 02, 2018
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:

SAALI, 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:

THIS NOTICE IS SUBMITTED TO DISSOLVE THE CORP.

Mailing address where claims can be sent:

824 CHRISTINA CIRCLE
OLDSMAR, FL 34677 US

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: ANAYAT ALI

Electronic Signature of the Person Filing