

L07000018163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

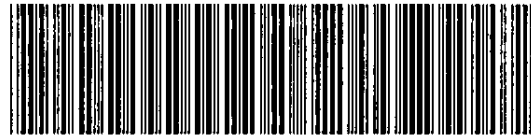
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100204033731

04/26/11--01029--002 **100.00

SECRETARY OF STATE
TALEAHASSEE, FLORIDA

2011 APR 29 PM 4: 41

FILED

J. SAULSBERRY
EXAMINER

MAY 2 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Cougar Investments LLC
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Leila Luechen
Name of Person

Cougar Investments LLC
Firm/Company

1626 Via Pilar
Address

Orlando, FL 32825
City/State and Zip Code

apr408@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Leila Luechen at (407) 277-5014
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$100 Filing Fee
- \$105 Filing Fee & Certificate of Status
- \$130 Filing Fee & Certified Copy
- \$135 Filing Fee, Certificate of Status & Certified Copy

FILED
 2011 APR 29 PM 4:41
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

**ARTICLES OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**



Pursuant to section 608.4411, Florida Statutes, this Florida limited liability company 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:

1. The name of the company is Cougar Investments LLC.
2. The document number of the company is L07000018163.
3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was March 25, 2011.
4. The revocation of dissolution was authorized in the same manner as the dissolution on March 21, 2011.

2011 APR 29 PM 4:41
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED

Signatures of the members having the same percentage membership interests necessary to approve the revocation of dissolution:

Signature	Typed or Printed Name
<u></u>	<u>Leila Luechen</u>
<u></u>	<u>James Luechen</u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>

Filing Fee: \$100.00

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED

2011 APR 29 PM 4:41

SECRETARY OF STATE TALLAHASSEE, FLORIDA

700204614337 04/26/11-01029-003 **138.75

CR2E041 (1/11)

DOCUMENT # L07000018163

1. Limited Liability Company's Name

Cougar Investments LLC

2 Principal Office Address - No P.O. Box #

1626 Via Pilar

3. Mailing Office Address

1626 Via Pilar

Suite, Apt. #, etc.

N/A

Suite, Apt. #, etc.

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32825

Country

Orange

Zip

32825

Country

Orange

4. State/Country of Formation

5. Date Organized or Qualified To Do Business in Florida

3/1/2007

6. FEI Number

Applied For Not Applicable

7. CERTIFICATE OF STATUS DESIRED

\$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Leila Luechen

Street Address (P.O. Box Number is Not Acceptable)

1626 Via Pilar

Suite, Apt. #, Etc.

N/A

City

Orlando

State FL

Zip Code 32825

E-mail Address:

apr408@bellsouth.net

(To be used for future annual report notices)

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent

Leila Luechen

REGISTERED AGENT MUST SIGN

Date

4/25/11

10. Names and Street Addresses of Managing Members/Managers

Table with 4 columns: Titles, Name of Managing Members/Managers, Street Address of Each Managing Member/Manager, City / State / Zip. Includes entries for Leila Luechen and James Luechen, and signature of J. SAULSBERRY EXAMINER dated MAY 2 2011.

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in Chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid.

Signature of Managing Member/Manager

Leila Luechen

Date

4/25/11

Daytime Phone #

407-277-5814

Typed or printed name of signing Managing Member/Manager

LEILA LUECHEN