

C17000039824

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

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18 MAR 26 PM 4: 15
STATE OF TEXAS
COMPTROLLER OF PUBLIC ACCOUNTS

J. LEGGETT
MAR 27 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2018

CHERYL-DENE SPRING
7900 NOVA DRIVE, 205
DAVIE, FL 33324 US

SUBJECT: SOBI LAW GROUP, PLLC
Ref. Number: L17000039824

We have received your document for SOBI LAW GROUP, PLLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of revocation of dissolution must be accompanied by a copy of the previously filed articles of dissolution. ✓

Please attach a copy of the Articles of Dissolution.

Please return the corrected original and one copy of 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) 245-6051.

Judy A Leggett
Regulatory Specialist II
Registration Section

Letter Number: 018A00004998

RECEIVED

2018 MAR 27 AM 10:40

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sobi Law Group, PLLC
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:

Cheryl-Dene Spring

Name of Person

Sobi Law Group PLLC

Firm/Company

7900 Nova Drive, 205

Address

Davie FL 33324

City/State and Zip Code

cdspring@sobilaw.com

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

For further information concerning this matter, please call:

Cheryl-Dene Spring

Name of Person

at (954) 3808778

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

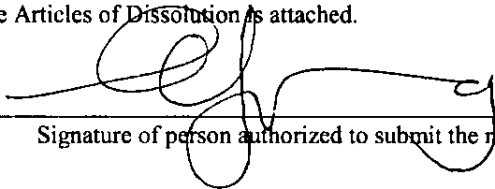
Enclosed is a check for the following amount:

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

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

Pursuant to section 605.0708, 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: Sobi Law Group, PLLC
2. The document number of the company is L17000039824
3. The effective date the Dissolution was filed is 2-20-17
4. The revocation of dissolution was authorized on 11/20/2017
5. A copy of the Articles of Dissolution ~~is~~ attached.



Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)

18 MAR 25 PM 4: 15
STATE OF FLORIDA
SECRETARY OF STATE

FILED
Nov 20, 2017
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:

SOBI LAW GROUP, PLLC

The document number of the limited liability company: L17000039824

The file date of the articles of organization: February 20, 2017

The effective date of the dissolution if not effective on the date of filing: December 1, 2017

A description of occurrence that resulted in the limited liability company's dissolution:

CLOSURE OF FIRM.

The name and address of the person appointed to wind up the company's activities and affairs:

CHERYL-DENE SPRING
7900 NOVA DRIVE, SUITE 205
DAVIE, FL 33324 UN

I/we submit this document and affirm that the facts stated herein are true. I/we am/are 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: **CHERYL-DENE SPRING**

Electronic Signature of authorized person