# LI7 0001 56731

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### COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	CCT: Adleins Laun Service LLC Name of Limited Liability Cor	
	Name of Limited Liability Cor	npany
	closed Statement of Revocation of Dissolution for Florida Limit ted for filing.	ed Liability Company and fec(s) are
Please	return all correspondence concerning this matter to:	
	Colby Adkins Contact Person	-
	Adkins Lown Service LLC Firm/Company	_
<b>(</b>	Address Address	- 96+,33
_D	aytong Beach, FL, 32114 City. State and Zip Code	_
<u>Co</u> E-1	mail address: (to be used for future annual report notification)	_
	ther information concerning this matter, please call:	
(	Name of Contact Person at (33)  Area Code	1265-2120
	Name of Contact Person Area Code	Daytime Telephone Number
	STREET 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, FL 32314

TO:

## 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.

The document number of the company is <u>L17000156731</u>			
The effective date the Dissolution was filed is October 10, 2017			
Sin V Min .			

#### FILED Oct 09, 2017 Secretary of State

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### 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:

ADKINS LAWN SERVICE LLC

The document number of the limited liability company: L17000156731

The file date of the articles of organization: July 21, 2017

The effective date of the dissolution if not effective on the date of filing: October 10, 2017

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

DIDN'T MAKE ANY MONEY

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

COLBY ADKINS 788 SUGAR HOUSE DR PORT ORANGE, FL 32129 US

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: COLBY ADKINS

Electronic Signature of authorized person