

L000000000061

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

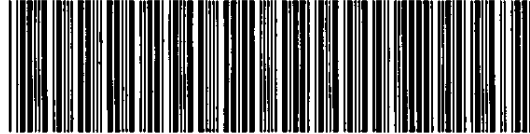
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 31 2016

SWANSON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Design Miami, LLC

Name of Limited Liability Company

The enclosed Statement of Revocation of Dissolution for Florida Limited Liability Company and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Linda Ebin-Levine, Esq.

Contact Person

Design District Management, Inc.

Firm/Company

3841 NE 2nd Avenue, Suite 400

Address

Miami, Florida 33137

City, State and Zip Code

alicia@dacra.com

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

For further information concerning this matter, please call:

Alicia Alonso

Name of Contact Person

at (

305

_____)
Area Code

531-8700

Daytime Telephone Number

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

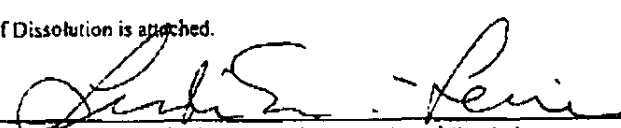
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E132 (10/15)

**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: Design Miami, LLC
2. The document number of the company is L00000000061
3. The effective date the Dissolution was filed is April 19, 2016
4. The revocation of dissolution was authorized on April 21, 2016
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)

CR2E132 (10/15)

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