

LD10000010029

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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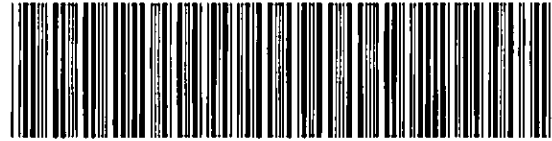
(Business Entity Name)

(Document Number)

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- ☐ **CERTIFIED COPY** _____
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- XX** **FILING** LLC Revocation

1. **EVENT SPECIALISTS OF SOUTH FLORIDA, LLC**
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Event Specialists of South Florida, 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:

Kammie Wogsland
Contact Person

Event Specialists of South Florida, LLC
Firm/Company

27 North Drive
Address

Key Largo, FL 33037
City, State and Zip Code

Wogsland@eventsforgroups.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kammie Wogsland at (305) 619-6043
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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: Event Specialists of South Florida, LLC
2. The document number of the company is LO1000010029
3. The effective date the Dissolution was filed is Dec. 30, 2020
4. The revocation of dissolution was authorized on Jan. 14, 2021
5. A copy of the Articles of Dissolution is attached.

Kammie Weigand 1/14/21
Signature of person authorized to submit the revocation of dissolution

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

FILED
Dec 30, 2020
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:

EVENT SPECIALISTS OF SOUTH FLORIDA, LLC

The document number of the limited liability company: L01000010029

The file date of the articles of organization: June 14, 2001

The effective date of the dissolution if not effective on the date of filing: December 31, 2020

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

THE COMPANY IS DISSOLVING AS A LLC CORPORATION AND CHANGING TO A SOLE PROPRIETORSHIP DUE TO DOWNSIZING DUE TO THE REPERCUSSIONS OF THE PANDEMIC.

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: **DEREK WOGSLAND**

Electronic Signature of authorized person