

LD3000000690

(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



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17 MAY -3 PM 05
OFFICE OF THE
CLERK OF THE
COURT
JUDICIAL
CIRCUIT IN
FLORIDA

MAY 04 2017

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2017

LYNDA V HARRIS
14411 COMMERCE WAY
MIAMI, FL 33016

SUBJECT: 2001 LLC
Ref. Number: L03000000690

We have received your document for 2001 LLC and your check(s) totaling \$50.00. However, the document has not been filed and is being retained in this office for the following:

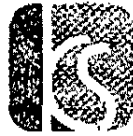
Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

Please return 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.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 317A00008388



KYMBERLEE CURRY SMITH, P.A.
LEGAL & TITLE SERVICES

VIA UPS DELIVERY

April 28, 2017

Division of Corporations
Department of State
c/o Tanya Henderson
2661 Executive Center Cir.
Tallahassee, FL 32301

Re: Reinstatement of 2001 LLC -L03000000690

Property Address: 2001 N.E. 167 St., Miami, FL

Dear Tanya,

Please be advised that I have filed for the dissolution of 2001 Florida LLC, so that the name can be made available after the reinstatement and amendment of and for the above referenced LLC. I will not revoke the dissolution of 2001 Florida LLC, L12000031423.

Thank you for all of your assistance in this matter.

Should you have any questions or concerns, please do not hesitate to contact our office.

Lynda V. Harris

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 2001 LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Lynda V. Harris

Name of Person

2001 LLC

Firm/Company

14411 Commerce Way

Address

Miami, FL 33016

City/State and Zip Code

lynda@lyndavharris.com

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

For further information concerning this matter, please call:

Name of Person

954 559-9816
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

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

2001 LLC

The Articles of Organization for this Limited Liability Company were filed on 01/07/2003 and assigned Florida document number L03000000690.

2001 Florida LLC

(Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

Florida

Zip Code

Page 1 of 3

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Robert Henderson		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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17 MAY -3
10 00 AM
STATE OF CALIFORNIA
COUNTY OF LOS ANGELES

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated _____, _____, _____.

L. W. Harn

Signature of a member or authorized representative of a member

Lynda V. Harris

Typed or printed name of signee