

L03000015609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

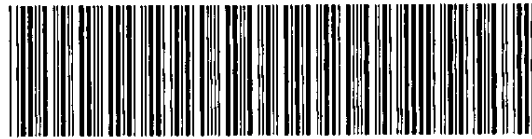
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200185024252

RECEIVED  
10 SEP 14 AM 10:47  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
10 SEP 14 PM 1:35  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

B. KOHR

SEP 14 2010

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 508145 7795467

AUTHORIZATION

*[Signature]*

COST LIMIT : \$ 100.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 SEP 14 PM 1:35

ORDER DATE : September 14, 2010

ORDER TIME : 9:34 AM

ORDER NO. : 508145-005

CUSTOMER NO: 7795467

DOMESTIC REVOCATION OF DISSOLUTION

NAME: SUNCOAST APARTMENTS OF TAMPA,  
LLC

EFFECTIVE DATE:

XX REVOCATION OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
\_\_\_\_ PLAIN STAMPED COPY  
\_\_\_\_ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Doreen Wallace -- EXT# 2928

EXAMINER'S INITIALS: \_\_\_\_\_

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 SEP 14 PM 1:35

Pursuant to section 608.4411, 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 SUNCOAST Apartments of Tampa, LLC
2. The document number of the company is 65-1187564  
L03000015609
3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was  
~~6/28/2010~~ 6/28/10 effective 7/1/2010
4. The revocation of dissolution was authorized in the same manner as the dissolution on 9/14/10.

Signatures of the members having the same percentage membership interests necessary to approve the revocation of dissolution:

Signature	Typed or Printed Name
<u>Mary Lee Kampsen</u>	<u>MARY LEE KAMPSEN</u>
_____	_____
_____	_____
_____	_____
_____	_____

**Filing Fee: \$100.00**