

LO5000005501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

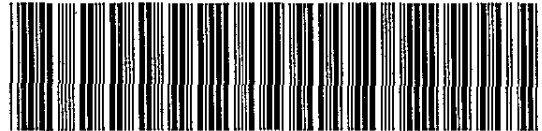
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 18 2006

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Abundant Life Health and Wellness Consulting, LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Nicole B. Hare
(Name of Person)

(Firm/Company)

13802 SW 256th Street
(Address)

Homestead, FL 33032
(City/State and Zip Code)

For further information concerning this matter, please call:

Nicole B. Hare at (786) 380-5932
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER 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, Florida 32314

Enclosed is a check for the following amount:

- \$100 Filing Fee
- \$105 Filing Fee & Certificate of Status
- \$130 Filing Fee & Certified Copy
- \$135 Filing Fee, Certificate of Status & Certified Copy

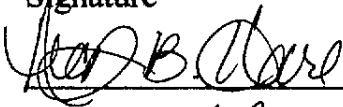

**ARTICLES OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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 Abundant Life Health & Wellness Consulting,
2. The document number of the company is L05000005501.
3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was March 10, 2006.
4. The revocation of dissolution was authorized in the same manner as the dissolution on May 1, 2006.

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TALLAHASSEE, FLORIDA

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

Signature	Typed or Printed Name
<u></u>	<u>Nicole B. Hare</u>
<u></u>	<u>Reginald Jean-Jacques</u>
_____	_____
_____	_____

Filing Fee: \$100.00