

LD5000091700

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APR 05 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SMI FAMILY 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:

Betsy Inbar
Contact Person

SMI FAMILY LLC
Firm/Company

2831 Ringling Blvd. #E117
Address

SARASOTA, FL. 34237
City, State and Zip Code

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

For further information concerning this matter, please call:

Betsy Inbar at (941) 350-4640
Name of Contact Person Area Code 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

**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: SMI FAMILY LLC
2. The document number of the company is 205000091700
3. The effective date the Dissolution was filed is 1-16-2018
4. The revocation of dissolution was authorized on 3-29-18
5. A copy of the Articles of Dissolution is attached.

Betty O'Brien

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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