## LD6000103142

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2012 SEP 24 PM 3: 00

C. LEWIS
SEP 2 5 2012
EXAMINER

## COVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: Dernatology of Century Village WPB
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:
Gerard Christophen Name of Person
Integrated Dermatology Group  Firm/Company
902 Clint Move Road Suite 226 Address
BOCA Raton FL 33487 City/State and Zip Code
gchristopher@mydermgroup.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Steuen Strohl at (50) 314 2000  Name of Person Area Code & Daytime Telephone Number
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 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$100 Filing Fee \$\ \text{\$105 Filing Fee & Certificate of Status} \ \ \text{Certified Copy} \ \ \text{Certified Copy} \

SECRETARY OF STATE DIVISION OF CORPORATIONS

2012 SEP 24 PM 3: 00

## 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 Dermatology of Century Village web LLC		
2.	The document number of the company is <u>LOGOOOIO3142</u>		
3.	The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was		
4.	The revocation of dissolution was authorized in the same manner as the dissolution on $9/5/12$ .		
Signa	atures of the members having the same percentage membership interests sary to approve the revocation of dissolution:		
Signa	Typed or Printed Name  Gerafd Christophen		
	Filing Fee: \$100.00		