

L06000118431

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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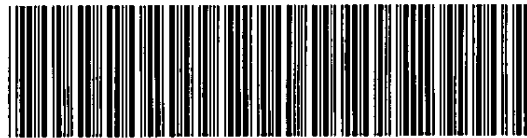
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Keith Menin Hotels, 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:

Mark Alhadeff

Contact Person

The Alhadeff Law Group, P.L.

Firm/Company

3050 Biscayne Blvd., P.H. 2

Address

Miami, Florida 33137

City, State and Zip Code

mark@alhadefflaw.com

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

For further information concerning this matter, please call:

Mark Alhadeff

Name of Contact Person

at (786) 618-9703

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

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TALLAHASSEE, FLORIDA

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**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: Keith Menin Hotels, LLC
2. The document number of the company is LOW000118431
3. The effective date the Dissolution was filed is MARCH 25, 2014
4. The revocation of dissolution was authorized on March 26, 2014
5. A copy of the Articles of Dissolution is attached.

 attorney-in-fact
Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)

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