

LO 10000910242

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

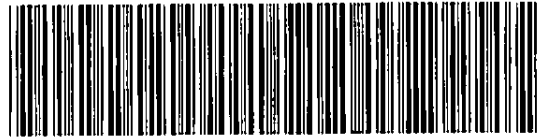
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
JUL 30 2025

Office Use Only



900451967239

FILED
2025 JUL 29 PM 3:17

FILED
2025 JUL 29 AM 10:48

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
(850) 524-6243

2025 JUL 29 AM 10:48
RECEIVED
TALLAHASSEE, FL

Please use funds from the account 120210000160: \$100.00

Authorization Signature *[Signature]*

On the River, LLC

L07000096242

__ Business Name

#Document

__ Certified Copy of the Articles of Organization

__ Certificate of Status

NEW FILINGS

- __ Profit
- __ Not for Profit
- __ LLC
- __ Domestication
- __ INC
- __ CORP
- __ LP

AMENDMENTS

- __ Amendment
- __ Resignation of MEMBER
- __ Change of Registered Agent
- __ Revocation of Dissolution
- __ Conversion
- __ Statement of Authority
- __ Merger
- ☒ REVOCATION OF DISSOLUTION

OTHER FILINGS

- __ TRANSMITTAL LETTER
- __ Fictitious Name
- __ Statement of Authority
- __ APOSTIL
- COUNTRY

REGISTRATION/QUALIFICATIONS

- __ Foreign Filing
- __ Partnership
- __ Reinstatement
- __ Statement of CORRECTION
- __ Domestication of a Foreign Corp.
- __ Other

EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-54372
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__ Other

EXAMINER'S INITIALS:

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: On The River, LLC
Name of Limited Liability Company

The enclosed Statement of Revocation of Dissolution for Florida Limited Liability Company and fees) are submitted for filing.

Please return all correspondence concerning this matter to:

Adriana Bove
Contact Person

On The River, LLC
Firm/Company

2828 Fairgreen Dr
Address

Miami Beach FL 33140
City, State and Zip Code

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

For further information concerning this matter, please call:

Adriana at 305 , 373 4950
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

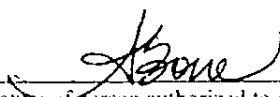
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2025 JUL 29 PM 3:19

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: On The River, LLC
2. The document number of the company is L07000096242
3. The effective date the Dissolution was filed is July 3, 2025
4. The revocation of dissolution was authorized on July 21, 2025
5. A copy of the Articles of Dissolution is attached.



Signature of person authorized to submit the revocation of dissolution

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

FILED
Jul 03, 2025
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:
ON THE RIVER, LLC

The document number of the limited liability company: L07000096242

The file date of the articles of organization: September 20, 2007

The effective date of the dissolution if not effective on the date of filing: July 3, 2025

A description of occurrence that resulted in the limited liability company's dissolution:

THE COMPANY CEASED OPERATIONS AND WAS DISSOLVED FOLLOWING A UNANIMOUS DECISION BY ITS MEMBERS DUE TO LACK OF ONGOING BUSINESS ACTIVITY AND FUTURE PROSPECTS

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes

Signature: CHRISTOPHER JONES

Electronic Signature of authorized person

This Dissolution was filed by
a SCAMMER!
It was not authorized.
Thanks, Bone