L08000100587

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COVER LETTER

Division of Corporations	
SUBJECT: Apollo Beach Angels, LLC	
Name of Limited Liability Cor	npany
The enclosed Statement of Revocation of Dissolution for Florida Limit submitted for filing.	ed Liability Company and fee(s) are
Please return all correspondence concerning this matter to:	
Nancy L Irwin	
Contact Person	_
Apollo Beach Angels	
Firm/Company	-
7443 Surrey Wood Lane	
Address	_
Apollo Beach, FI 33572	
City, State and Zip Code	_
nirwin24@gmail.com	_
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call: Nancy Irwin , 813	. 480-7522
Name of Contact Person Area Code	Daytime Telephone Number
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, Florida 32301	

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.	Apollo Beach Angels, LLC The name of the company is:
2.	The document number of the company is
3.	The effective date the Dissolution was filed is 04/15/2014
	The revocation of dissolution was authorized on 04/15/2014
5.	A copy of the Articles of Dissolution is attached.
	Mancagl. Druin

Filing Fee:

\$100.00

Certified Copy: \$30.00 (optional)

FILED Mar 21, 2014 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:

APOLLO BEACH ANGELS LLC

The document number of the limited liability company: L08000100587

The file date of the articles of organization: October 24, 2008

The effective date of the dissolution if not effective on the date of filing: April 15, 2014

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

WE HAVE DECIDED TO BECOME A SMALL BUSINESS CORPORATION AND HAVE FILED FORM 2553 ON JAN 1 2014.

The name and address of the person appointed to wind up the company's activities and affairs:

NANCY L IRWIN 7443 SURREY WOOD LN APOLLO BEACH, FL 33572 US

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: NANCY L IRWIN

Electronic Signature of authorized person