# L10000026321

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## CORPORATE ACCESS, \_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee#Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

#### **WALK IN**

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	PICK UP	2: <u>3/4 DANNY</u>
XX	CERTIFIED COPY PHOTOCOPY	
	CUS	
XX	FILING	REVOCATION DISSOLUTION
	TOWER SUITE 6 LLC (CORPORATE NAME AND DOCUMENT	#)
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PECIAI NSTRU(	CTIONS:	

#### COVER LETTER

TO:	Registration Section Division of Corporations		
SHRII	ECT: TOWER SUITE 6, LLC		
SUDSI	Name of Lir	nited Liability Co	mpany
	closed Statement of Revocation of Dissolutio ted for filing.	n for Florida Limi	ted Liability Company and fee(s) are
Please	return all correspondence concerning this ma	tter to:	
Denis l	Fishman Esq		
	Contact Person		<u></u>
Denis 1	Fishman PA		
	Firm/Company		_
1920 E	Hallandale Beh Blvd., Ste. PH8		
	Address		_
Halland	dale Beach, FL 33009		
	City, State and Zip Code		<b>~</b>
•	nisfishman.com		
E-r	mail address: (to be used for future annual rep	ort notification)	
For fur	ther information concerning this matter, pleas	e call:	
Denis I	Fishman Esq	305 _ at (	9319355
	Name of Contact Person	Area Code	Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### 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.	TOWER SUITE 6 LLC The name of the company is:
2.	The document number of the company is
3.	The effective date the Dissolution was filed is
4.	The revocation of dissolution was authorized on
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)

CR2E132 (10/15)

#### FILED Dec 09, 2021 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:

**TOWER SUITE 6 LLC** 

The document number of the limited liability company: L10000026321

The file date of the articles of organization: March 8, 2010

The effective date of the dissolution if not effective on the date of filing: December 10, 2021

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

COMPANY IS NO LONGER ACTIVE

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

JOHN LIONETTI 102 REGATTA DRIVE, 102 JUPITER, FL 33477 UN

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: JOHN LIONETTI

Electronic Signature of authorized person