

L10000105234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

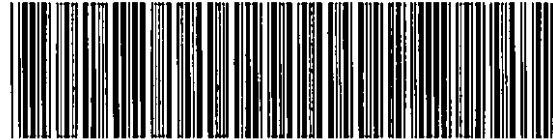
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2019 APR -2 AM 10:06  
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CC  
Rev. of Diss

APR 12 2019  
ALBRITTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SFI FUND 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:

Jack Kobe Oved  
\_\_\_\_\_  
Contact Person

Sunnyside18 Holdings LLC  
\_\_\_\_\_  
Firm/Company

16425 Collins Ave WS8A  
\_\_\_\_\_  
Address

Sunny Isles Beach, FL 33160  
\_\_\_\_\_  
City, State and Zip Code

info@sunnyside18.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jack Kobe Oved  
\_\_\_\_\_  
Name of Contact Person at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

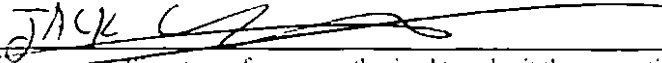
**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**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: SFI FUND LLC
2. The document number of the company is L10000105234
3. The effective date the Dissolution was filed is January 14, 2019
4. The revocation of dissolution was authorized on February 5, 2019
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**  
**2019 APR -2 AM 10:06**  
SFI FUND LLC  
L10000105234

FILED  
Jan 13, 2019  
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:

SFI FUND, LLC

The document number of the limited liability company: L10000105234

The file date of the articles of organization: October 7, 2010

The effective date of the dissolution if not effective on the date of filing: January 14, 2019

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

SFI FUND LLC DIVESTED IN 2017. ALL OF ITS ASSETS IN 2017. SFI FUND LLC CEASED ALL BUSINESS OPERATIONS AS OF 12/31/2017.

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

JACK KOBE OVED  
16425 COLLINS AVE WS8A  
SUNNY ISLES BEACH, 33160

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: JACK KOBE OVED

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Electronic Signature of authorized person