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(Requestor's Name) (Address) (Address)	200224874232		
(City/State/Zip/Phone #)	03/16/1201029015 **105.00		
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	REPRID ANII: 43 REPRID ANII: 43 REPRID ANII: 43 REPRID		
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F.

## **COVER LETTER**

то:	Registration Section Division of Corporations				
SUBJE	СТ:	H.	MAYA	LLC	
		Nam	e of Limited	Liability Company	

Dear Sir or Madam:

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The enclosed Articles of Revocation of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Name of Pe itzok e UN Firm/Company /State and Zip Code GM a

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

For further information concerning this matter, please call:

Name of Person Area Code & Daytime Telephone Number

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

## Enclosed is a check for the following amount:

\$100 Filing Fee

\$105 Filing Fee & Certificate of Status

\$130 Filing Fee & Certified Copy

MAILING ADDRESS:

**Division of Corporations** 

Tallahassee, Florida 32314

**Registration Section** 

P.O. Box 6327

S135 Filing Fee, Certificate of Status & Certified Copy

## ARTICLES OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to section 608.4411, 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:

H. MYA, UC The name of the company is \_\_\_\_\_ 1. The document number of the company is 10000/(4660). 2.

- 3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was December 31, 2011
- 4. The revocation of dissolution was authorized in the same manner as the dissolution on  $March 14, c_0 12$ .

Signatures of the members having the same percentage membership interests necessary to approve the revocation of dissolution:

Signature	C	Typed or Printed Name			
ferital	Kalu	Revital	Keren		
				<b>D</b> **	
					Witterstate
CR2E097 (8/05)	Filing	g Fee: \$100.00		Allis 43	*

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