

L11000016552

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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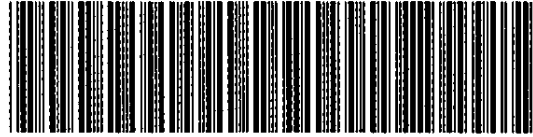
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 18 2014

COVER LETTER

TO: *Registration Section
Division of Corporations

SUBJECT: Amobile Enterprises, 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:

Shirley Nelson

Contact Person

Amobile

Firm/Company

12973 SW 112th ST PMB 123

Address

Miami, FL 33186

City, State and Zip Code

shirley.nelson@amobiledevice.com

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

For further information concerning this matter, please call:

Shirley Nelson

Name of Contact Person

at (786) 519 4580

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

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TALLAHASSEE, FLORIDA

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**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: Amobile Enterprises, LLC
2. The document number of the company is: L11000016552
3. The effective date the Dissolution was filed is: July 20, 2014
4. The revocation of dissolution was authorized on: Shirley Nelson
5. A copy of the Articles of Dissolution is attached.

Shirley Nelson 8/12/2014
Signature of person authorized to submit the revocation of dissolution

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

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