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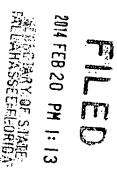
(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: AVALON PARK JEWELERS				
SUBJECT: AVALON PARK LEWELERS Name of Limited Liability Co	mpany			
The enclosed Revocation of Articles of Dissolution for Florida Limite for filing.	d Liability Company and fee(s) a	are subm	itted	
Please return all correspondence concerning this matter to:				
TIFFANY D. BAYLEY Contact Person	_			
AVALON PARK JEWELERS, LLC. Firm/Company	_	Zw.	2014 F	
3710 AVALON PARK BLVD EAST		ETAN:	EB 20	
ORLANDO, FL 32828 City, State and Zip Code		EEFLE SEFLE	PM -:	
City, State and Zip Code	_	RIDA	: 	Agra A
TIFFAM BAY WY CALL, COM E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
TIFFANY BAYLEY at (3A) Name of Contact Person 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			

REVOCATION OF ARTICLES 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: AVALON PARK SEWETERS, LUC.
2.	The document number of the company is
3.	The effective date the Articles of Dissolution was revoked is 2-14-2014
4.	The revocation of dissolution was authorized on 2-14-2014
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)