

K11 000 113669

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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(Document Number)

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600380066846

2009 JUN 24 PM 3:55

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OELE 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:

JACOBINA TRUMP
Contact Person

OELE LLC
Firm/Company

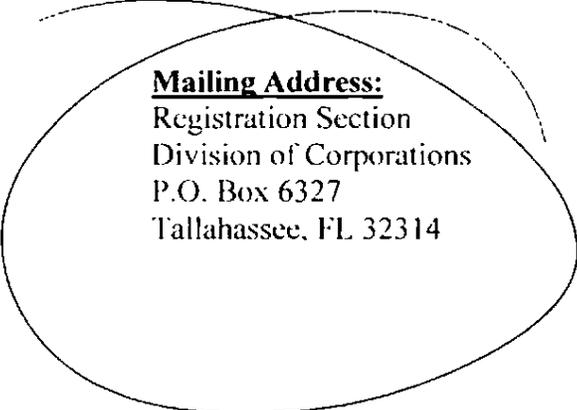
1750 GALE STREET
Address

ENGLEWOOD
City, State and Zip Code

JACOBINAT@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JACOBINA TRUMP at (786) 457 1606
Name of Contact Person Area Code Daytime Telephone Number



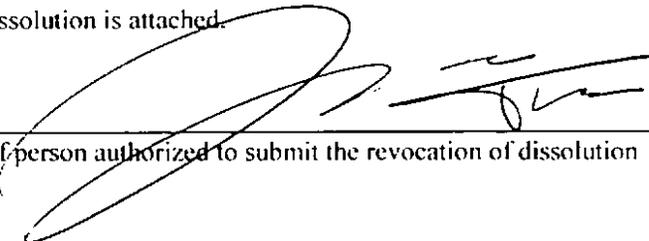
Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
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. The name of the company is: OELE LLC
2. The document number of the company is L11000113669
3. The effective date the Dissolution was filed is December 13 2021
4. The revocation of dissolution was authorized on December 22 2021
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)

2022 JUN 24 PM 3:06

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
2021 DEC 13 PM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

OELE

2. The Articles of Organization were filed on _____ and assigned

document number 63-2015649298-0

3. The delayed effective date the dissolution if not effective on the date of filing: _____

(effective date cannot be prior to or more than 90 days later than date document is received for filing)

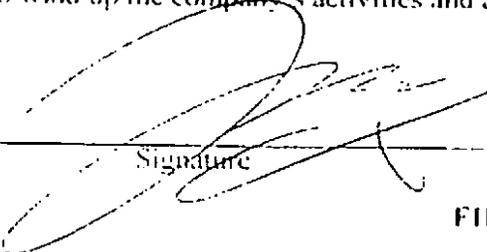
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

I am not able to generate
sufficient income from the
business and have a full time
job.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: _____

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

JACOBINA TRUMP
Printed Name

FILING FEE: \$25.00