

L120000 29147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100272337321

05/01/15--01014--029 **100.00

FILED
15 MAY - 1 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100272337321 MAY 07 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Omni Property Group

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:

John Ankerman

Contact Person

Omni Property Group

Firm/Company

P O Box 8575

Address

Delray Beach, FL 33482

City, State and Zip Code

johnankerman@msn.com

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

For further information concerning this matter, please call:

John E. Ankerman

at (561)

843-8066

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

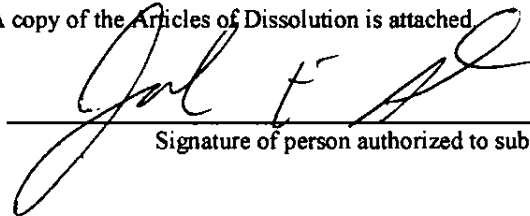
MAILING ADDRESS:

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

**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: Omni Property Group
2. The document number of the company is L12000029143
3. The effective date the Dissolution was filed is 3/27/15
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. The revocation of dissolution was authorized on 3/27/15
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)

FILED
15 MAY - 1 PM 5:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA