

L12000135965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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18 JUN 20 PM 2:49
J. J. EGGETT
JUN 02 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Residential Doctor, 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:

Keith Bobenrieth
Contact Person

Residential Doctor, LLC
Firm/Company

16091 122nd Dr N
Address

Jupiter, FL 33477
City, State and Zip Code

kbobenrieth9@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Keith Bobenrieth at (561) 251-3036
Name of Contact Person Area Code Daytime Telephone Number

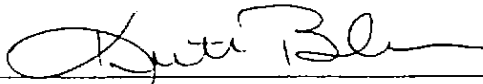
STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

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: Residential Doctor, LLC
2. The document number of the company is L12000135965
3. The effective date the Dissolution was filed is May 17, 2018
4. The revocation of dissolution was authorized on June 22, 2018
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)

18 JUN 28 10:28:49

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
Residential Doctor, LLC

2. The Articles of Organization were filed on 10/25/18 and assigned
document number L12000135965

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).

Out of business

FILED
2018 MAY 17 PM 3:26
ALLAHBADER, FLORIDA

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]
Signature

Keith Bobenrieth
Printed Name

FILING FEE: \$25.00