

L12000145067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
15 JUN 24 PM 3:21  
TALLAHASSEE, FLORIDA

JUN 25 2015

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 5, 2015

KYLIE WAGENET  
3225 AVIATION AVENUE, SUITE 700  
MIAMI, FL 33133

SUBJECT: THE BREAST CENTER OF PLANTATION, LLC  
Ref. Number: L12000145067

We have received your document for THE BREAST CENTER OF PLANTATION, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to reinstate the limited liability company are as follows: \$100.00 reinstatement fee; \$138.75 filing fee per year for the years 2015 through 2015; and \$5.00 for each certificate of status requested (optional). Therefore, the total amount due at this time is \$138.75.

The enclosed annual report or reinstatement application and fee(s) must be submitted before the Revocation of Articles of Dissolution can be processed. Please complete and return the enclosed annual report or reinstatement application and the appropriate fee(s) to the PERSONAL AND CONFIDENTIAL ATTENTION of the undersigned.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Mason  
Regulatory Specialist II

Letter Number: 715A00011848

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Breast Center of Plantation, 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:

Kylie Wagenet

\_\_\_\_\_  
Contact Person

Femwell Group Health, Inc.

\_\_\_\_\_  
Firm/Company

3225 Aviation Ave, Suite 700

\_\_\_\_\_  
Address

Miami, FL 33133

\_\_\_\_\_  
City, State and Zip Code

kwagenet@femwell.com

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

For further information concerning this matter, please call:

Kylie Wagenet

\_\_\_\_\_  
Name of Contact Person

at ( 305 )

\_\_\_\_\_  
Area Code

273-4641

\_\_\_\_\_  
Daytime Telephone Number

**STREET ADDRESS:**

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

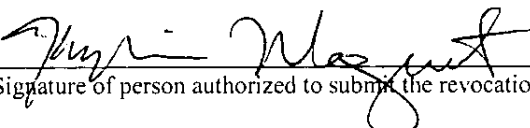
**MAILING ADDRESS:**

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: The Breast Center of Plantation, LLC
2. The document number of the company is L12000145067
3. The effective date the Dissolution was filed is 04/21/2015  
**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 4/21/2015
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)**

CR2E132 (4/15)

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