

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Consideration A. Filipport
Special Instructions to Filing Officer:

Office Use Only



800306693398

12/20/17---01009--017 \*\*100.00

17 DEC 20 AM 8: 51

S. WARREN DEC 2 1 2017

## COVER LETTER

	ration Section on of Corporations	
SUBJECT:	MERGER CHOICE	ES LLC
	Name of Limited Liability (	Company
The enclosed St submitted for ti	tatement of Revocation of Dissolution for Florida Li ling.	mited Liability Company and fee(s) are
Please return al	l correspondence concerning this matter to:	
<u></u>	ILAN D. MARTIN	
	Contact Person	
	TERGERCHOICES LL	<u>C</u>
	507H AVE W	
BRA	*DENTON FL 342 City. State and Zip Code	10
E-mail adds	WDMART @ GMAIL ress: (to be used for future annual report notification	Com
	rmation concerning this matter, please call;  \[ \frac{1}{D}  \text{MARTIN} \]  of Contact Person \[ \text{Area Co} \]	, 527 - 1254
Name	of Contact Person Area Co	de Daytime Telephone Number
Registi Divisio Cliftor 2661 E	ET ADDRESS: ration Section on of Corporations n Building Executive Center Circle assee, 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: MERGERCHOICES LLC	
2.	The document number of the company isL13000001952	
3.	The effective date the Dissolution was filed is DECEMBER 30, 2017	
4.	The revocation of dissolution was authorized on DEZEMBER 18, 2017	
5.	A copy of the Articles of Dissolution is attached.	
	A copy of the Articles of Dissolution is attached.    12   18   2err	
Signature of person authorized to submit the revocation of dissolution		

Filing Fee:

\$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

POEC 20 AM 8: 56

## State of Florida Department of State

I certify from the records of this office that MERGERCHOICES LLC was a limited liability company organized under the laws of the State of Florida, filed on January 2, 2013.

The document number of this limited liability company is L13000001952.

I further certify that said limited liability company was voluntarily dissolved on December 10, 2017, effective December 30, 2017.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Twelfth day of December, 2017

Secretary of State



Authentication ID: 800306571108-121217-1.13000001952

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html