

L13000012981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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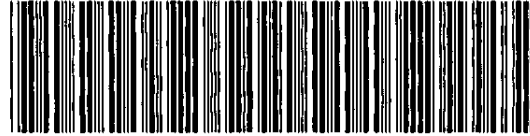
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 JUN 11 PM 2:51
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

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JUN 12 2015

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Monkey Island
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:

Malcolm Teasdale

Contact Person

Monkey Island LLC

Firm/Company

4350 Stonebridge Road

Address

Destin, FL 32541

City, State and Zip Code

malcolmt teasdale@gmail.com

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

For further information concerning this matter, please call:

Malcolm Teasdale

at (404) 213-8022

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

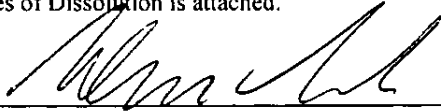
MAILING ADDRESS:

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: Monkey Island LLC
2. The document number of the company is L13000012981
3. The effective date the Dissolution was filed is 5/12/2015
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 6/8/2015
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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May 12, 2015
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State:
MONKEY ISLAND, LLC

The document number of the limited liability company: L13000012981

The file date of the articles of organization: January 25, 2013

A description of occurrence that resulted in the limited liability company's dissolution:
NO BUSINESS ACTIVITY

The name and address of the person appointed to wind up the company's activities and affairs:
MALCOLM TEASDALE
4350 STONEBRIDGE ROAD
DESTIN, FL 32541

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: **MALCOLM TEASDALE**

Electronic Signature of authorized person

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA