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DIVISION OF CONFORMIONS

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: VLADYS ENTERPRISES, LLC		
Name of	Limited Liability Co.	npany
The enclosed Statement of Revocation of Dissolusubmitted for filing.	ntion for Florida Limi	ted Liability Company and fee(s) are
Please return all correspondence concerning this	matter to:	
Vladimir St. Louis		
Contact Person	,	_
Firm/Company		_
2566 SW 83rd Terrace		_
Address		
Miramar, Florida 33025		
City, State and Zip Code		_
VSL9891@hotmail.com		
E-mail address: (to be used for future annual	report notification)	_
For further information concerning this matter, pl	lease call:	
Vladimir St. Louis	954 at (682-2917
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

- CR2E132 (10/15)

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.	VLADYS ENTERPRISES, LLC The name of the company is:	<u> </u>
	The document number of the company is	1310H OF CL
3.	4/30/17 The effective date the Dissolution was filed is	PH 1: 30
4.	The revocation of dissolution was authorized on	
5.	The state of the s	<u>. </u>
	Signature of person authorized to submit the revocation of dissolution	1

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)