

L14 000006610

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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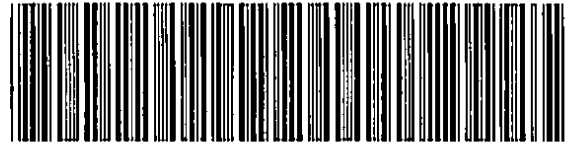
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE BAR OF FLORIDA  
TALLAHASSEE, FLORIDA  
2019 MAY 13 A P 08

FILED

T. LEMBUX

MAY 27 2019

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DUNNIA MEDICAL SOLUTIONS 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:

MARIA C SOUSA  
Contact Person

SOUSA N ASSOCIATES INC  
Firm/Company

5728 MAJOR BLVD STE 309  
Address

ORLANDO, FL 32819  
City, State and Zip Code

DOCUMENTS @ SOUSANASSOCIATES.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIA C SOUSA at ( 407 ) 800-7028  
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

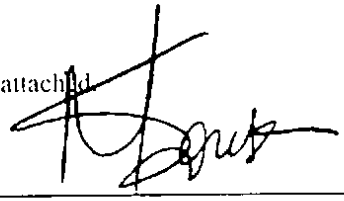
FILED

2019 MAY 13 A 4 08

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.

TALLAHASSEE, FLORIDA

1. The name of the company is: DUNNIA MEDICAL SOLUTIONS, LLC
2. The document number of the company is L14000006610
3. The effective date the Dissolution was filed is 04/12/2019
4. The revocation of dissolution was authorized on 05/07/2019
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)

FILED  
Apr 12, 2019  
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:

DUNNIA MEDICAL SOLUTIONS, LLC

The document number of the limited liability company: L14000006610

The file date of the articles of organization: January 13, 2014

The effective date of the dissolution if not effective on the date of filing: April 12, 2019

A description of occurrence that resulted in the limited liability company's dissolution:

VOLUNTARY DISSOLUTION

The name and address of the person appointed to wind up the company's activities and affairs:

MICHEL CHAMON  
6735 CONROY WINDERMERE RD, STE 233  
ORLANDO, FL 32835 US

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: MICHEL CHAMON

\_\_\_\_\_  
Electronic Signature of authorized person