

L140000 57867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

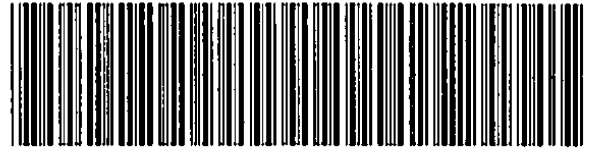
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



200331912952

07/23/19-01005--028 \*\*100.00

RECEIVED

JUL 22 2019

2019 JUL 22 AM 10:48

FILED

C GOLDEN

JUL 31 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CLYDE AND CHARLIES, 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:

CHARLES PATRONI

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

CLYDE & CHARLIES, LLC

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

1157 SEABREEZE LANE

\_\_\_\_\_  
Address

GULF BREEZE, FLORIDA 32563

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

CHARLIE@DOLPHYSYS.COM

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

For further information concerning this matter, please call:

CHARLES PATRONI

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

at ( 850 ) 206 9904

\_\_\_\_\_  
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 JUL 22 AM 10:4

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.

- CLYDE & CHARLIES, LLC
1. The name of the company is: \_\_\_\_\_
  2. The document number of the company is L14000057867
  3. The effective date the Dissolution was filed is 04/25/2019
  4. The revocation of dissolution was authorized on 07/12/2019
  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 25, 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:

CLYDE & CHARLIES, LLC

The document number of the limited liability company: L14000057867

The file date of the articles of organization: April 9, 2014

The effective date of the dissolution if not effective on the date of filing: April 25, 2019

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

SOLD BUSINESS

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: **CHARLES PATRONI**

---

Electronic Signature of authorized person