## L14000064093

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### STATEMENT OF REVOCATION OF DISSOLUTION 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.

ı.	The name of the company is: TO NAILS 3 LLC
	The document number of the company is <u>L1400064093</u>
<u>ئ</u> .	The effective date the Dissolution was filed is 91322
	The revocation of dissolution was authorized on 91322
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)

CR2E132 (10/15)

# State of Florida Department of State

I certify from the records of this office that TD NAILS 3 LLC was a limited liability company organized under the laws of the State of Florida, filed on April 21, 2014, effective April 18, 2014.

The document number of this limited liability company is L14000064093.

I further certify that said limited liability company was voluntarily dissolved on December 13, 2022.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Sixteenth day of December, 2022



Secretary of State

Authentication ID: 700399064447-121622-1.14000064093

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

### FILED Dec 13, 2022 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:

TD NAILS 3 LLC

The document number of the limited liability company: L14000064093

The file date of the articles of organization: April 21, 2014

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

**ACCIDENTALLY FORGOTTEN** 

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: THANH TRAN

Electronic Signature of authorized person