

L14000096525

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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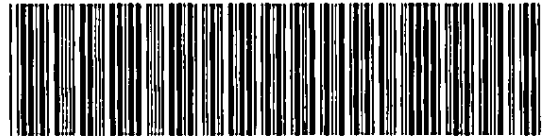
(Business Entity Name)

(Document Number)

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TO: Registration Section
Division of Corporations

SUBJECT: LUVI COSMETIC USA 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:

DOUGLAS VIRGILIO SILVA

Contact Person

Firm/Company

10300 W MACNOB ROAD

Address

TAMARAC FLORIDA 33321

City, State and Zip Code

WEDERSON@USA.COM

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

For further information concerning this matter, please call:

WEDERSON OLIVEIRA

at (305) 8420133

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

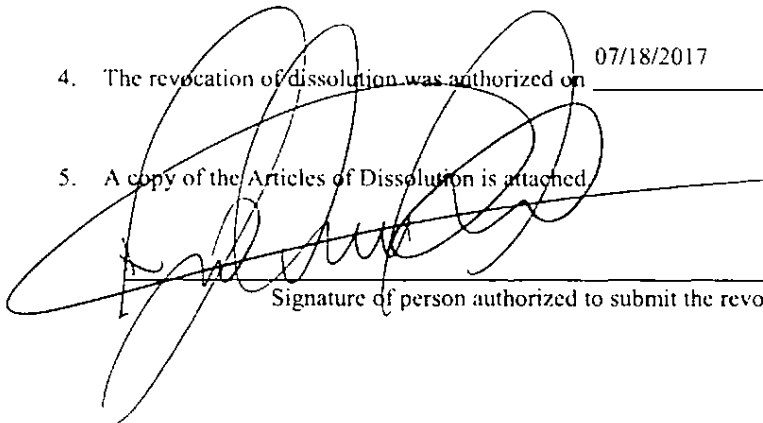
MAILING ADDRESS:

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: LUVI COSMETIC USA LLC
2. The document number of the company is L14000096525
3. The effective date the Dissolution was filed is 05/02/2017
4. The revocation of dissolution was authorized on 07/18/2017
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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