

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : US TAX CONSULTING INC  
Account Number : I20160000060  
Phone : (407)674-8969  
Fax Number : (407)674-8970

**LLC REVOCATION OF DISSOLUTION  
MANOLO INVESTMENTS LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$105.00

2022 APR 25 PM 4:05

2022 APR 25 AM 9:29  
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Electronic Filing Menu

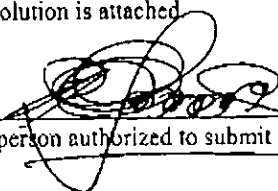
Corporate Filing Menu

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**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: MANOLO INVESTMENTS LLC
2. The document number of the company is L15000011280
3. The effective date the Dissolution was filed is 04/14/2022
4. The revocation of dissolution was authorized on 04/21/2022
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)

APPROVED  
AND  
FILED  
2022 APR 25 AM 9:24  
CLERK OF COURT  
HALL COUNTY, FLORIDA

**FILED**  
**Apr 14, 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:

**MANOLO INVESTMENTS LLC**

The document number of the limited liability company: L15000011280

The file date of the articles of organization: January 20, 2015

The effective date of the dissolution if not effective on the date of filing: April 14, 2022

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

**VOLUNTARILY DISSOLUTION UPON THE WRITTEN CONSENT OF ALL MEMBERS OF THE LIMITED LIABILITY COMPANY.**

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

**MARCELO RIVEIRO BARCIA**  
**357 MARCELLO BLVD**  
**KISSIMMEE, FL 34746 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: **MARCELO RIVEIRO BARCIA**

Electronic Signature of authorized person