## L15000029200

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Southwise About the 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:
Teresa Life Contact Person
Southwise Advertures LLC Finn/Company
Finn/Company  We are raw  400 W. Harry AIA Lot 33  Address  Address  Address  Address  Address  Finn/Company  We are raw  Finn/Company  We are raw  Finn/Company  We are raw  Finn/Company  Finn/Company  We are raw  Finn/Company  Finn/Company  We are raw  Finn/Company  Finn/Company  Finn/Company  We are raw  Finn/Company  Finn/Company  We are raw  Finn/Company  Finn/Company
Tupiter F1 33477 mail and Zip Code
E-mail address: (to be used for future annual report nortification)
For further information concerning this matter, please call:
Name of Contact Person at (SU-) 1/02-3000  Area Code Daytime Telephone Number
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

# 1022 APR 29 PH 6

## 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: Southwind Adventures LLC
2.	The document number of the company is
3.	The effective date the Dissolution was filed is 3/29/22
4.	The revocation of dissolution was authorized on 4/26/22
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 Mar 29, 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:

SOUTHWIND ADVENTURES LLC

The document number of the limited liability company: L15000029200

The file date of the articles of organization: February 16, 2015

The effective date of the dissolution if not effective on the date of filing: March 29, 2022

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

NA

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

DON LIPKE PO BOX 208 CEDAR KEY, 32625

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: DONALD LIPKE

Electronic Signature of authorized person