

L15000056259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

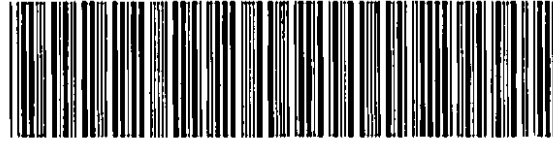
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



400301367964

07/18/17--01027--016 \*\*130.00

FILED  
17 JUL 18 PM 4:14  
SECRETARY OF STATE  
HALL MARKING & RECORDS

D. SCOTT  
JUL 21 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CODEWIZART 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:

JAROSLAW MYSZEWSKI

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

CODEWIZART LLC

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

UL OFIAR OSWIECIMSKICH 3/13

\_\_\_\_\_  
Address

SWIDNICA, 58-100, POLAND

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

JMY@CODEWIZART.COM

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

For further information concerning this matter, please call:

JAROSLAW MYSZEWSKI

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

at ( 561 ) 623-9369

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**STREET ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

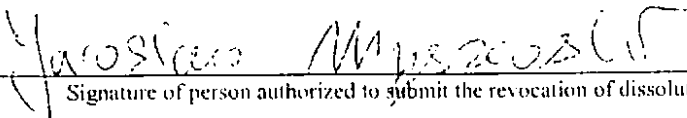
**MAILING ADDRESS:**

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: CODEWIZART LLC
2. The document number of the company is L15000056259
3. The effective date the Dissolution was filed is 02/07/2017
4. The revocation of dissolution was authorized on 02/15/2017
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)**

# *State of Florida*

## *Department of State*

I certify from the records of this office that CODEWIZART LLC was a limited liability company organized under the laws of the State of Florida, filed on March 10, 2015.

The document number of this limited liability company is L15000056259.

I further certify that said limited liability company was voluntarily dissolved on February 7, 2017, effective February 15, 2017.

*Given under my hand and the Great Seal of  
Florida, at Tallahassee, the Capital, this the  
Eighth day of February, 2017*

*Ken Detmer*

*Secretary of State*



Authentication ID: 400295270544-020817-1.15000056259

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

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