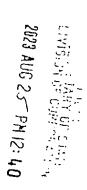


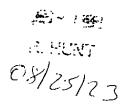
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





08/25/23--01032--007 **100.00





COVER LETTER

TO:	Registration Section Division of Corporations		
SHBJ	ECT: SMALS LLC		
	Name of Lit	mited Liability Cor	mpany
	nclosed Statement of Revocation of Dissolutio tted for filing.	n for Florida Limi	ted Liability Company and fee(s) are
Please	return all correspondence concerning this ma-	iter to:	
CARC	DLINE LARSON		
	Contact Person		_
INTE	RNATIONAL DIVISION BY LARSON LLC		
Firm/Company			_
7901 i	KINGSPOINTE PKWY STE 15		
	Address		_
ORLA	NDO, FL. 32819		
	City, State and Zip Code	_	
	RA@LARSONACC.COM		
E-	mail address: (to be used for future annual rep	ort notification)	
For fu	rther information concerning this matter, pleas		
CARC	DLINE G LARSON	at (3703686
	Name of Contact Person	Area Code	Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 81
			Tallahassee El 32303

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.

	SMALS LLC
Ι.	The name of the company is:
2.	The document number of the company is
	05 02/2023
3.	The effective date the Dissolution was filed is
4.	08/22/2023 The revocation of dissolution was authorized on
5 .	A copy of the Articles of Dissolution is attached.
	SILVIA ELAINE DA SILVA MACHADO
	Signature of nerson authorized to submit the revocation of dissolution

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

2023 AUG 25 PH 12: 40

FILED May 02, 2023 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:

SMALS LLC

The document number of the limited liability company: L15000056832

The file date of the articles of organization: March 31, 2015

The effective date of the dissolution if not effective on the date of filing: May 2, 2023

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

BUSINESS NOT OPERATING

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

DA SILVA MACHADO, SILVIA ELAINE 7901 KINGSPOINTE PKWY STE 15 ORLANDO, FL 32811 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: DA SILVA MACHADO, SILVIA ELAINE

Electronic Signature of authorized person