

L150000 64580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

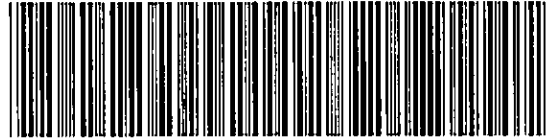
(Business Entity Name)

(Document Number)

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

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12/17/19 --04:14--PM --100.00

2019 DEC 17 AM 10:54

R. WHITE  
DEC 30 2019

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Association Specialty Group 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:

Jonathan Louis

Contact Person

Association Specialty Group LLC

Firm/Company

9050 Pines Boulevard, Suite 480

Address

Pembroke Pines, Florida 33024

City, State and Zip Code

jlouis@asgflorida.com

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

For further information concerning this matter, please call:

Jonathan Louis

Name of Contact Person

at ( 786 ) 412-2158

Area Code

Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

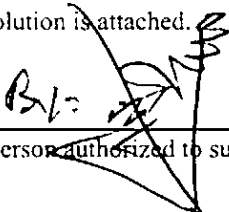
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

STATEMENT OF REVOCATION OF DISSOLUTION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

2019 DEC 17 AM 10:54

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: Association Specialty Group LLC
2. The document number of the company is L15000064580
3. The effective date the Dissolution was filed is 12/16/2019
4. The revocation of dissolution was authorized on 12/15/2019
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  
Dec 15, 2019  
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:

ASSOCIATION SPECIALTY GROUP LLC

The document number of the limited liability company: L15000064580

The file date of the articles of organization: April 13, 2015

The effective date of the dissolution if not effective on the date of filing: December 15, 2019

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

SALE OF COMPANY. NOW OPERATING AS A DBA

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

JONATHAN LOUIS  
9050 PINES BOULEVARD STE.480  
PEMBROKE PINES, FL 33024

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: JONATHAN LOUIS

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Electronic Signature of authorized person