## L600121455

| (Re                     | questor's Name)   |                 |
|-------------------------|-------------------|-----------------|
| (Ad                     | dress)            |                 |
| (Ad                     | dress)            |                 |
| (Cit                    | y/State/Zip/Phone | <del>;</del> #) |
| PICK-UP                 | ☐ WAIT            | MAIL            |
| (Bu                     | siness Entity Nan | ne)             |
| (Do                     | cument Number)    |                 |
| Certified Copies        | _ Certificates    | of Status       |
| Special Instructions to | Filing Officer:   |                 |
|                         |                   |                 |
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2016 MAR 24 A 9 38 SECRETARY OF STATE AND ARRESTS FOR THE

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## COVER LETTER

|                  | egistration Section<br>vivision of Corporations   |                     |   |                               |             |                 |
|------------------|---|---------------------|---|-------------------------------|-------------|-----------------|
| SUBJECT          | Miami Shores Location   |                     |   |                               |             |                 |
| SUBJECT          |   | mited Liability Con | mpany   | _                             |             |                 |
| The enclos       | sed Statement of Revocation of Dissolutio<br>for filing.  | n for Florida Limi  | ted Liability Company and   | fee(s) are                    | 3           | •               |
| Please retu      | orn all correspondence concerning this ma   | tter to:            |   |                               |             |                 |
| Dennis Ri        | vero  |                     |   |                               |             |                 |
|                  | Contact Person  |                     | _   |                               |             |                 |
| Miami Sh         | ores Location, LLC  |                     |   |                               |             |                 |
|                  | Firm/Company  |                     | <del></del>   |                               |             |                 |
| 1080 NE          | 84 Street   |                     |   |                               |             |                 |
|                  | Address   |                     | _   |                               |             |                 |
| Miami, FI        | L 33138   |                     |   |                               |             |                 |
|                  | City, State and Zip Code  | <del></del>         | _   |                               |             |                 |
| dennrive@        | gaol.com  |                     |   | FE                            | 2           |                 |
| E-mai            | l address: (to be used for future annual re   | port notification)  | <u> </u>  |                               | 2016 MAR    | £ 1             |
| For further      | information concerning this matter, pleas   | se call:            |   | S.X                           |             | * G KZLE        |
| Dennis Ri        | vero  | 305                 | 479-6165  | (2) (2)<br>(3) (4)<br>(3) (5) | 24          | Zirin care      |
| N                | lame of Contact Person  | Area Code           | Daytime Telephone N   |                               | بي          | Parties<br>Name |
| R<br>D<br>C<br>2 | TREET ADDRESS: egistration Section vivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301 |                     | MAILING ADDRESS:<br>Registration Section<br>Division of Corporations<br>P. O. Box 6327<br>Tallahassee, FL 32314 | 2) 15<br>15                   | :<br>ယ<br>လ |                 |

## 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. | Miami Shores Location, LLC The name of the company is:   |
|----|--|
| 2. | The document number of the company is  |
| 3. | The effective date the Dissolution was filed is  |
| 4. | The revocation of dissolution was authorized on  |
| 5. | A copy of the Articles of Dissolution is attached.   |
|    |  |
|    | Signature of person authorized to submit the revocation of dissolution of the submit the revocation of the submit the su |
|    | Certified Copy: \$30.00 (optional)   |

## State of Florida Department of State

I certify from the records of this office that MIAMI SHORES LOCATION, LLC was a limited liability company organized under the laws of the State of Florida, filed on July 15, 2015.

The document number of this limited liability company is L15000121655.

I further certify that said limited liability company was voluntarily dissolved on March 18, 2016, effective March 18, 2016.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Nineteenth day of March, 2016

Secretary of State



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