

L15000165970

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

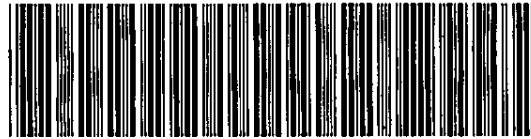
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300283909503

04/05/16--01025--030 **100.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 APR -5 P 2:44

FILED

APR 08 2016
J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

EEP TRADING LLC

SUBJECT: _____
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:

Esther Porto

Contact Person

EEP Trading LLC

Firm/Company

1717 West 24th St

Address

Miami Beach, FL 33140

City, State and Zip Code

ep@estherporto.com

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

For further information concerning this matter, please call:

Esther Porto at (786) 277-8183

Name of Contact Person 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

2016 APR -5 P 2:41
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

**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.

EEP Trading LLC

1. The name of the company is: _____

L15000165970

2. The document number of the company is _____

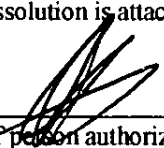
03/27/2016

3. The effective date the Dissolution was filed is _____

03/28/2016

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

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2016 APR -5 P 2:44

FILED