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SEP 17 .2018

EXAMINER

## COVER LETTER

Division of Corporations	11 , 1,
SUBJECT: FARMON Name of Lim	ited Liability Company
The enclosed Statement of Revocation of Dissolution submitted for filing.	for Florida Limited Liability Company and fee(s) are
Please return all correspondence concerning this matt	eer to:
Contact Person	MCC
Larance + Firm Company	toldings LLC
821 Bamboo Address	tare :
Delray Beh	, A 33483
F- nail address: (to be used for future annual repo	· • (11 DC) C
For further information concerning this matter, please Name of Contact Person	-1 $u = a = a = a$
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 th	e company is:	Jarar	nce Hold	ings LL		
2. The document	number of the comp	pany is	15000184	1303		
<ol> <li>The effective d</li> </ol>	ate the Dissolution	was filed is	7/8/201	8		
4. The revocation	! of dissolution was a	authorized on	9/8/18			
5. A copy of the z	Articles of Dissolution	on is attached.	-waire	tohlet 1	ind	
Signature of person authorized to submit the revocation of dissolution						
	·	Filing Fee:	\$100.00		<b>201</b>	
, Certif	Certified Copy:	tified Copy: \$30.00 (optional)	· \	21 a35		
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CR2E132 (10/15)				<b>:</b>	ب	