115000206284

(Re	questor's Name)	
(Ad	dress)	
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revocation of dissolution

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COVER LETTER

TO:	Registration Section Division of Corporations		
SHRH	ECT: Wausau 28, LLC		
201111	Name of	Limited Liability Co	mpany
	closed Statement of Revocation of Dissoluted for filing.	tion for Florida Limi	ted Liability Company and fee(s) are
Please	return all correspondence concerning this i	natter to:	
Mark 1	Foth		
	Contact Person		_
Schmie	dikofer, Toth, Loeb & Drosen, LLC		
	Firm/Company		
949 GI	enview Avenue		
	Address		_
Wauw	atosa, WI 53213		
	City, State and Zip Code		
-	lawintosa.com		_
E-	mail address: (to be used for future annual	report notification)	
For fur	ther information concerning this matter, pl	ease call:	
Greer l	Black	at (259-9300
	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, FL 32303

2022 JUL 14 AM 9: 24

STATEMENT OF REVOCATION OF DISSOLUTION OF THE SET FLOWER 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.	Wausau 28, LLC The name of the company is:
2.	L15000206284 The document number of the company is
3.	The effective date the Dissolution was filed is
4.	07/07/2022 The revocation of dissolution was authorized on
5.	A copy of the Articles of Dissolution is attached.
	Signature of person Juliporized to submit the revocation of dissolution
	Filing Fee: \$100.00 Certified Copy: \$30.00 (optional)

CR2E132 (10/15)