

L16000061316

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

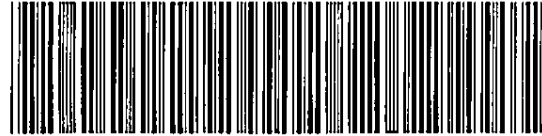
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



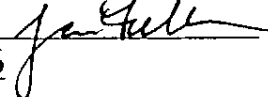
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RECEIVED
2023 MAY 30 PM 3:09
STATE
TALLAHASSEE, FL

RECEIVED
2023 MAY 30 PM 3:50
STATE
TALLAHASSEE, FLORIDA

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: 1202100000160 : \$100.00

Authorization Signature: 
Amalfi Realty LLC L16000061316
BUSINESS DOC#

☐ Certified Copy of Articles of Organization
☐ Certificate of Status

NEW FILINGS

☐ Profit Corp
☐ Not for Profit
☐ Officer/Director
☐ Limited Liability
☐ Domestication
☐ Other
☐ **CORP**
☐ **LLLP**

AMENDMENTS

☐ Amendment
☐ Resignation of R.A.

☐ Change of Registered Agent
☒ Revocation of Dissolution
☐ Merger
☐ **Conversion**
☐ **Amended and restated Articles**
☐ **Statement of Authority**

OTHER FILINGS

☐ **Trademark**
☐ Annual Report

☐ Fictitious Name

☐ APOSTILLE

Country

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership
☐ Reinstatement

☐ Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AMALFI REALTY 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:

ANA MARIA MALFI
Contact Person

AMALFI REALTY LLC
Firm/Company

7208 W SAND LAKE RD. SUITE 305
Address

ORLANDO FL. 32819
City, State and Zip Code

MALFIANA@HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANA MARIA MALFI at (305) 922-5605
Name of Contact Person 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

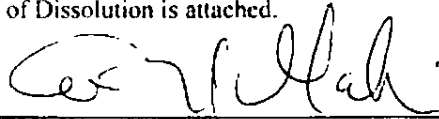
FILED

2023 MAY 30 PM 3:09

CLERK OF STATE
TALLAHASSEE, FL

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: AMALFI REALTY LLC
2. The document number of the company is L16000061316
3. The effective date the Dissolution was filed is FEBRUARY 17, 2023
4. The revocation of dissolution was authorized on MAY 26, 2023
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
Feb 17, 2023
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:

AMALFI REALTY LLC

The document number of the limited liability company: L16000061316

The file date of the articles of organization: March 28, 2016

The effective date of the dissolution if not effective on the date of filing: February 17, 2023

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

I AM RESIGNING TO MY POSITION OF BROKER FOR AMALFI REALTY, MY COMPANY
AMALFI REALTY WILL BE CLOSED

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: ANA MARIA MALFI

Electronic Signature of authorized person