

L16 000088885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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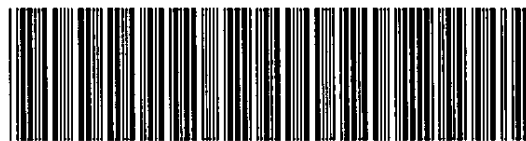
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S Warren

JAN 18 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: St. Lucy's Eye Institute Of Oviedo 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:

Melissa Parziale
Contact Person

Orange Ave Consulting
Firm/Company

1106 N Orange Ave Ste 102
Address

Orlando, FL 32804
City, State and Zip Code

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

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Contact Person Area Code Daytime Telephone Number

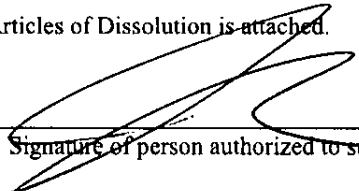
STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**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 the company is: St. Lucy's Eye Institute of Oviedo LLC
2. The document number of the company is L16000088885
3. The effective date the Dissolution was filed is 1/9/2017
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)

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TALLAHASSEE, FLORIDA

State of Florida

Department of State

I certify from the records of this office that ST. LUCY'S EYE INSTITUTE OF OVIEDO LLC was a limited liability company organized under the laws of the State of Florida, filed on May 5, 2016, effective May 1, 2016.

The document number of this limited liability company is L16000088885.

I further certify that said limited liability company was voluntarily dissolved on January 9, 2017.

*Given under my hand and the Great Seal of
Florida, at Tallahassee, the Capital, this the Tenth
day of January, 2017*

Ken DeFries

Secretary of State



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<https://efile.sunbiz.org/certauthver.html>