

L16000117882

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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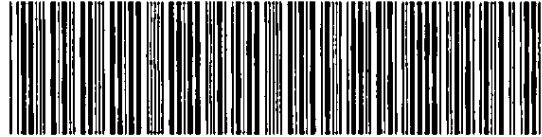
(Business Entity Name)

(Document Number)

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S. WARREN

OCT 04 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CYBER BLACK OPERATIONS 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:

Luis Miguel Dena Escalera

Contact Person

Cyber Black Operations LLC

Firm/Company

12485 SW 137th AVE, Suite 212

Address

Miami, FL 33186

City, State and Zip Code

ldena@blackind.net

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

For further information concerning this matter, please call:

Luis Miguel Dena Escalera

at (

786

585-5655

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: Cyber Black Operations LLC
2. The document number of the company is L16000117882
3. The effective date the Dissolution was filed is 08/16/2017
4. The revocation of dissolution was authorized on 08/16/2017
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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Articles of Dissolution For A Limited Liability Company

Please review the filing for accuracy and the fee to file. If you need to make corrections, use y 'BACK' button, make the necessary changes and use the 'CONTINUE' button again. The filing will be updated exactly as you have entered it. Once you have submitted the information, you cannot be updated, removed cancelled or refunded.

Name of Limited Liability Company CYBER BLACK OPERATIONS LLC

The Articles of Organization were filed on 06/20/2016 and assigned document number L16000117882.

Certified Copy Desired No
Certificate of Status Desired Yes

Correspondence E-mail Address

E-mail address to whom correspondence should be e-mailed

E-mail Address ALCASVIL@YAHOO.COM

Effective date of dissolution: 08/16/2017

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

NO BUSINESS GENERATED

Mailing Address

Name ALFONSO CASTANO
Address 13821 SW 153RD AVE
City, State MIAMI, FL
Zip Code & Country 33196

Signature of an authorized person, or, if there are no members, the signature of the person appointed and listed above to windup the activities and affairs:

Signature ALFSONSO CASTANO

Continue