·	Electronic Filing Cover Sheet Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.
	(((H20000302307 3)))
	H:00:003023073ABCR Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.
	To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP. Account Number : 076666002140 Phone : (727)461-1818 Fax Number : (727)441-8617
2020 AUC 31 PH 2: 49	LLC REVOCATION OF DISSOLUTION RAJ JAR LLC

.

SEP 03 2020

STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

Pursuant to the provisions of 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 of the articles of dissolution.

1. Name of the company: RAJ JAR'LLC

2. Document number: L16000125929

3. Effective date the Dissolution was filed is July 7, 2020.

4. Revocation of dissolution was authorized on August 12, 2020.

5. A copy of the Articles of Dissolution is attached.

ADAM ROSEN, Authorized Representative

٠. "

3 1020 AUS 31 P 4: 50

FILED Jul 07, 2020 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:

RAJ JAR LLC

The document number of the limited liability company: L16000125929

The file date of the articles of organization: July 1, 2016

The effective date of the dissolution if not effective on the date of filing: July 7, 2020

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

THE LLC MEMBERS VOTED TO DISSOLVE THE LLC BECAUSE THE BUSINESS PURPOSE IS COMPLETE.

The name and address of the person appointed to wind up the company's activities and affairs:

TRUE BOOKKEEPING 1253 PARK STREET CLEARWATER, FL 33756 US

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: RAJ JAR

Electronic Signature of authorized person