L16000144621

(Re	equestor's Name)			
(Ac	ldress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Ві	usiness Entity Nan	ne)		
(Document Number)				
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COVER LETTER

Division of Corporations CT: Destin Tax House LLC		
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	ited Liability Con	npany
	for Florida Limit	ed Liability Company and fee(s) are
eturn all correspondence concerning this matter	er to:	
Cruz or Michael Johnson		
Contact Person		-
Tax House LLC		
Firm/Company	<u> </u>	-
in St Suite 5		
Address		
FL 32541		
City, State and Zip Code		-
xhousellc@gmail.com		
nail address: (to be used for future annual repo	rt notification)	-
her information concerning this matter, please	call:	
Cruz or Michael Johnson	850	281-9756
Name of Contact Person	Area Code	Daytime Telephone Number
STREET ADDRESS: Registration Section Division of Corporations Clifton Building		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314
	Name of Limitolosed Statement of Revocation of Dissolution ed for filing. Tetum all correspondence concerning this matter. Contact Person Tax House LLC Firm/Company Address FL 32541 City, State and Zip Code Tax housellc@gmail.com Tax house LLC Tax house LLC	Name of Limited Liability Considered Statement of Revocation of Dissolution for Florida Limit ed for filing. Teturn all correspondence concerning this matter to: Coruz or Michael Johnson Contact Person Tax House LLC Firm/Company Address FL 32541 City, State and Zip Code Exhousellc@gmail.com Inail address: (to be used for future annual report notification) The information concerning this matter, please call: Cruz or Michael Johnson A Cruz or Michael Johnson Name of Contact Person STREET ADDRESS: Registration Section Division of Corporations Clifton Building

CR2E132 (10/15)

Tallahassee, Florida 32301

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.	Destin Tax House LLC The name of the company is:		
2.	The document number of the company is		
3.	The effective date the Dissolution was filed is		
4.	The revocation of dissolution was authorized on	16 DEC	k) }
5.	A copy of the Articles of Dissolution is attached.	30 PM	France
	Signature of person authorized to submit the revocation of dissolution	<u> </u>	

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

FILED Dec 24, 2016 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:

DESTIN TAX HOUSE LLC

The document number of the limited liability company: L16000144621

The file date of the articles of organization: August 2, 2016

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

PARTNERS SEPARATING AND NO LONGER INTERESTED IN KEEPING BUSINESS OPEN

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: MONICA CRUZ

Electronic Signature of authorized person