

L16000187361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

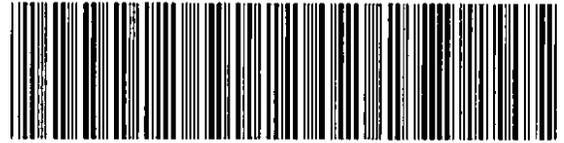
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2024 OCT 11 11:07 AM \*610110

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** OS DRESSAGE SERVICES, 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:

TARYN HARTNETT

\_\_\_\_\_  
Contact Person

CHAPMAN LAW GROUP, PLC

\_\_\_\_\_  
Firm/Company

255 PROFESSIONAL WAY, STE. 100

\_\_\_\_\_  
Address

WELLINGTON, FL 33414

\_\_\_\_\_  
City, State and Zip Code

TEH@CHAPMANLAWGROUP.NET

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

For further information concerning this matter, please call:

TARYN HARTNETT

at ( 561 ) 753-5996

\_\_\_\_\_  
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:**

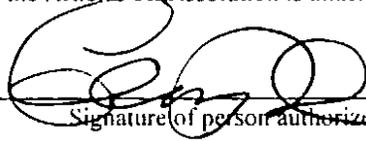
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

STATEMENT OF REVOCATION OF DISSOLUTION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

2024 OCT -8 PM 3:59

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: OS DRESSAGE SERVICES, LLC
2. The document number of the company is L16000187361
3. The effective date the Dissolution was filed is 05/01/2024
4. The revocation of dissolution was authorized on 10/01/2024
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  
May 01, 2024  
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:

OS DRESSAGE SERVICES LLC

The document number of the limited liability company: L16000187361

The file date of the articles of organization: October 10, 2016

The effective date of the dissolution if not effective on the date of filing: May 1, 2024

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

END OF BUSINESS ACTIVITIES.

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

ODED SHIMONI  
13833 WELLINGTON TRC, STE 150  
WELLINGTON, FL 33414 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: ODED SHIMONI

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Electronic Signature of authorized person