L16000224043

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
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COVER LETTER

TO:		tration Section ion of Corporations		
SUBJE	TT.	NXTLVL TECHNOLOGY LLC		
SOBJE.	.c	Name of Lin	nited Liability (Company
The end submitt			i for Florida Li	mited Liability Company and fee(s) are
Please r	return a	Il correspondence concerning this mat	ter to:	
		JARED DASILVA		
•		Contact Person		
		NXTLVL TECHNOLOGY LLC		
		Firm/Company		
		888 Biscayne Blvd, Apt 5111		
		Address		
		Miami, FL 33132		
		City, State and Zip Code		
		Jareddasilval@gmail.com		
E-r	nail ado	lress: (to be used for future annual rep	ort notification)
For furt	her info	ormation concerning this matter, please	e call:	
		Jared DaSilva	305 at (781-7983
	Name	of Contact Person	Area Co	de Daytime Telephone Number
	Regi Divis P.O.	ing Address: stration Section sion of Corporations Box 6327 shassee, 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

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: NXTLVL TECHNOLOGY LLC
	The document number of the company isL16000224043
3.	The effective date the Dissolution was filed is 03/21/2020
4.	The revocation of dissolution was authorized on
5	A copy of the Articles of Dissolution is attached.
• •	Jared D. Aidre
	Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)