L17000010209

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



600437129386

10/30/24--01020--015 **100.00





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:	mbos	CAZE,	PO104	vas LIC
	document number of the compan) (0000102	09	
3. The	effective date the Dissolution wa	s filed is	8/10/24		
4. The	revocation of dissolution was aut	horized on		·	
5. A c	opy of the Articles of Dissolution	is attached.			
	Signature of person a	nuthorized to suf	omit the revocation of di	ssolution (2024 GCT
	F C	iting Fee: 'ertified Copy:	\$100,00 \$30,00 (optional)		7 30 <i>1</i>
			•	SES FIL	±:
CR2E132 (10	0/15)			Γ·,	-4- 1