# h17000119246

(Requestor's Name)				
(Address)				
(Address)				
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(Cit. (Chata 77 a /Dhana 40				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Emity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer				
Special Instructions to Filing Officer:				
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Q. SILAS				
MAY 23 2022				
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Office Use Only



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### COVER LETTER

TO:	Registration Section Division of Corporations		
SUD I	ECT: JMIKESERVICES LLC		
SUBJ	Name of Li	mited Liability Co	mpany
	iclosed Statement of Revocation of Dissolution ted for filing.	on for Florida Limi	ted Liability Company and fee(s) are
Please	return all correspondence concerning this ma	atter to:	
JANE	T M. RING-YOUNG		
	Contact Person	<del></del>	_
JMIKI	ESERVICES LLC		
	Firm/Company		<del></del>
804 C	RESTVIEW CR E		
	Address		_
WILD	WOOD, FLORIDA 34785		
	City, State and Zip Code		_
ringstr	ansportation@gmail.com		
Ē-	mail address: (to be used for future annual re	port notification)	_
For fur	ther information concerning this matter, plea	se call:	
JANE	Γ M. RING-YOUNG	229 at (	262-5502
	Name of Contact Person	Area Code	Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

FILED

## STATEMENT OF REVOCATION OF DISSOLUTION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE TALLAHASSEE, FI

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:
2.	The document number of the company is
3.	Dece,ber 14, 2021 The effective date the Dissolution was filed is
4.	The revocation of dissolution was authorized on 64.01.2022
5.	A copy of the Articles of Dissolution is attached.
	Signature of person authorized to submit the revocation of dissolution
	Signature of person authorized to subject the revocation of association

\$100.00

Certified Copy: \$30.00 (optional)

Filing Fee:

CR2E132 (10/15)

#### FiLED Dec 14, 2021 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:

JMIKESERVICES LLC

The document number of the limited liability company: L17000119246

The file date of the articles of organization: May 31, 2017

The effective date of the dissolution if not effective on the date of filing: December 14, 2021

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

HUSBAND STOLE COMPUTER AND ALL ACCOUNTING RECORDS

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

JANET M. YOUNG 804 CRESTVIEW CR E WILDWOOD, FL 34785

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: JANET M. YOUNG

Electronic Signature of authorized person