

0861810001780

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

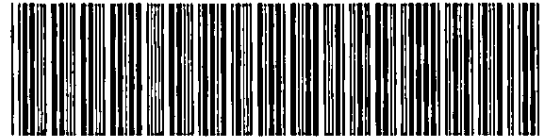
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

JAN 25 2016

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DETAILS & MEMORIES 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:

YVES MAIA

Contact Person

TAX LINKS CONSULTANTS

Firm/Company

5111 S ORANGE AVE

Address

EDGEWOOD, FL 32809

City, State and Zip Code

TAXLINKS@CONSULTANT.COM

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

For further information concerning this matter, please call:

YVES MAIA

Name of Contact Person

at (407) 270-4846

Area Code

Daytime Telephone Number

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

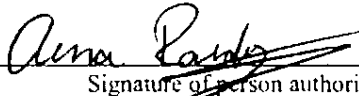
MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**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.

- DETAILS & MEMORIES LLC
1. The name of the company is: _____
2. The document number of the company is L17000181780
3. The effective date the Dissolution was filed is 01/05/18
4. The revocation of dissolution was authorized on 01/15/18
5. A copy of the Articles of Dissolution is attached.



Signature of person authorized to submit the revocation of dissolution

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JUDICIAL CIRCUIT IN
TALLAHASSEE, FLORIDA

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)