

L17 000 221 206

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

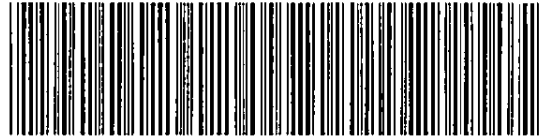
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clean & Seal Pros 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:

Kyle Weisgerber
Contact Person

Clean & Seal Pros LLC
Firm/Company

4092 SW McCandless Street
Address

Port Saint Lucie FL 34953
City, State and Zip Code

Cleanandsealprosllc@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kyle Weisgerber at 772 354-9975
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

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TALLAHASSEE, FL

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TALLAHASSEE, FL

DEED

Signature of person authorized to submit the revocation

CR2E132 (10/15)