

L180000 17463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

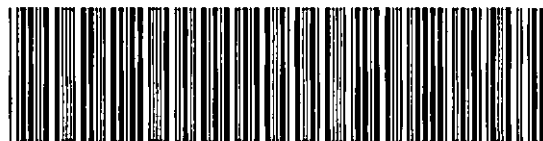
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/14/19--01003--007 **\$35.00

03/05/19--01006--004 **\$65.00

FILED

2019 MAR -5 PM 4:11

CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
FLORIDA
TALLAHASSEE, FL

C. GOLDEN

MAR -6 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MOBILE FOOT DOC L.L.C.
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:

MARCELO VILLALBA
Contact Person

MOBILE FOOT DOC L.L.C.
Firm/Company

4445 N.W. 100TH AVENUE
Address

CORAL SPRINGS, FL. 33065
City, State and Zip Code

MV381467@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCELO VILLALBA at (863) 242-9296
Name of Contact Person 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 19, 2019

MARCELO VILLALBA
4445 NW 100TH AVENUE
CORAL SPRINGS, FL 33065

SUBJECT: MOBILE FOOT DOC LLC
Ref. Number: L18000017463

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$65.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 619A00003572

RECEIVED
2019 FEB 28 AM 11:06
SECRETARY OF STATE
TALLAHASSEE, FL

FILED


STATEMENT OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY

2019 MAR -5 PM 4: 12

STATE
OF FLORIDA

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: MOBILE FOOT DOC L.L.C.
2. The document number of the company is L 18 0000 17463
3. The effective date the Dissolution was filed is 12/18/2018
4. The revocation of dissolution was authorized on 2/11/2019
5. A copy of the Articles of Dissolution is attached.



Signature of person authorized to submit the revocation of dissolution

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

FILED
Dec 18, 2018
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:

MOBILE FOOT DOC LLC

The document number of the limited liability company: L18000017463

The file date of the articles of organization: January 19, 2018

The effective date of the dissolution if not effective on the date of filing: December 18, 2018

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

LACK OF CLIENTS

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

MARCELO VILLALBA
4445 NW 100TH AVENUE
CORAL SPRINGS, FL 33065 US

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: MARCELO VILLALBA

Electronic Signature of authorized person