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## COVER LETTER

TO:	Registration Section Division of Corporations		
6110 113		Logistics	
SUBJE	.ci:	Logistics Name of Limited Liability Co	mpany
	closed Statement of Revocation ed for filing.	n of Dissolution for Florida Limi	ted Liability Company and fee(s) are
Please r	return all correspondence conc	erning this matter to:	
	Michael	Porring	_
	comacti		_
	CZT	Losistics	
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m	porring o gmail	ture annual report notification)	_
For furt	her information concerning this	Smatter, please call:	Daytime Telephone Number
	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

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

2018 OCT 15 PM 2: 23

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 entire of dissolution.

1.	The name of the company is: $E2J$ $Cosistics$
2.	The document number of the company is
3.	The effective date the Dissolution was filed is
	The revocation of dissolution was authorized on Michael Porrino
4.	The revocation of dissolution was authorized on ///////////////////////////////////
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)