

L19 000007038

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

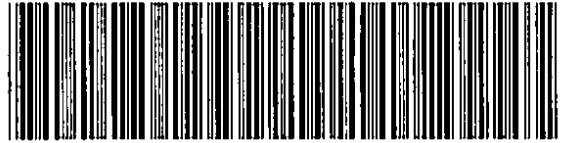
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/03/20--01050--012 **43.75

04/03/20--01000--001 **81.25

APR - 3 2020
C Kinser

FILED
2020 APR - 2 AM 8:31
SECURITY STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2020 MAR -2 11:18

March 25, 2020

MICHEL ESCARMENT
725 ICHABOD AVE S
LEHIGH ACRES, FL 33973

SUBJECT: YOO CUSTOMZ LLC
Ref. Number: L19000007038

We have received your document for YOO CUSTOMZ LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

There is a fee due of 61.25.

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.

Catherine M Wood
Regulatory Specialist II

Letter Number: 220A00006546

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: YOO CustomZ, 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:

Michel ESCarment
Contact Person

Firm/Company

725 Ichabod Ave S
Address

Lehigh Acres, FL 33973
City, State and Zip Code

Mike85E@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mike Escarment at (239) 784-1670
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:

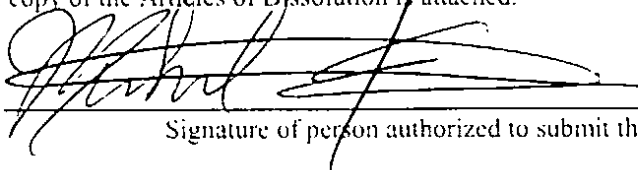
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY

FILED
2020 APR -2 AM 8:31
SECRETARY OF STATE
TALLAHASSEE, FL

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: Yoo Customz LLC
2. The document number of the company is L19000007038
3. The effective date the Dissolution was filed is 1/20/2020
4. The revocation of dissolution was authorized on 3/31/2020
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
Jan 20, 2020
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:

YOO CUSTOMZ LLC

The document number of the limited liability company: L19000007038

The file date of the articles of organization: January 4, 2019

The effective date of the dissolution if not effective on the date of filing: January 21, 2020

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

I CLOSE DUE TO ME GOING BACK TO SCHOOL, AND NOT HAVING ENOUGH FUNDS TO SUPPORT
THE BUSINESS

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

MICHEL ESCARMENT
725 ICHABOD AVE S
LEHIGH ACRES, FL 33973

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: MICHEL ESCARMENT

Electronic Signature of authorized person