

L19000025687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

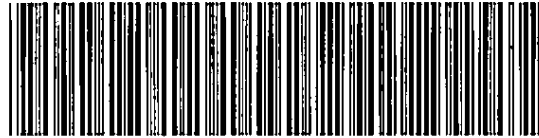
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/09/21--01021--013 **100.00

FILED
APR 9 2021
PM 4:37
TALLAHASSEE, FL

JUL 10 2021



**BLALOCK
WALTERS**

ATTORNEYS AT LAW

WE MAKE A DIFFERENCE

April 8, 2021

Via Federal Express

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

RE: Center for Brain Health, LLC
Document No.: L19000025687
File Number: 41129.000

Dear Sir or Madam:

Enclosed for filing please find a Statement of Revocation of Dissolution for Florida Limited Liability Company together with our Firm check in the amount of \$100.00 for the filing fee.

Should you have any questions please contact me.

Sincerely,


Sarah J. Orendorff | FRP

Enclosures

sorendorff@blalockwalters.com

2835120v1

FILED
Mar 25, 2021
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:

PROBIZ CONSULTING, LLC

The document number of the limited liability company: L12000008710

The file date of the articles of organization: January 19, 2012

The effective date of the dissolution if not effective on the date of filing: March 25, 2021

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

THE COMPANY HAS CEASED ITS OPERATION

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: EDSON C GISSONI

Electronic Signature of authorized person

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Center for Brain Health, 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:

Nicola Kobritz

Contact Person

Firm/Company

5602 Marquesas Circle, Ste 105

Address

Sarasota, FL 34233

City, State and Zip Code

sharon@youthfulaginghomecare.com

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

For further information concerning this matter, please call:

Nicola Kobritz

at (941) 925-9532

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

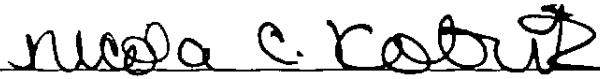
Street Address:

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**

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: Center for Brain Health, LLC
2. The document number of the company is L19000025687
3. The effective date the Dissolution was filed is 12/31/2020
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)

FILED
-3 PM 4:37
2021
JAN 4 2021
TALLAHASSEE
FLORIDA