

L19000026439

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

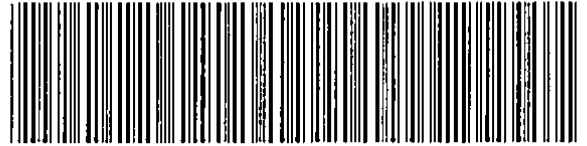
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/28/20--01011--012 ♦♦100.00

2020 MAY 29 AM 8:22

2020 MAY 28 PM 2:21

RECEIVED

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O SIMMONS

MAY 29 2020

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GIRLS DREAM LLC

Signature _____

Requested by: SETH

05/27/20

Name

Date

Time

Walk-In

Will Pick Up

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File _____

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

Dissolution / Withdrawal _____

Annual Report / Reinstatement _____

Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GIRLS DREAM 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:

EMANUELLE OLIVEIRA

Contact Person

CSG CAPITAL SERVICES GROUP INC

Firm/Company

1191 E NEWPORT CENTER DR SUITE 103

Address

DEERFIELD BCH, FL 33442

City, State and Zip Code

EMANUELLE@THEWAYGROUP.BIZ

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

For further information concerning this matter, please call:

EMMA

Name of Contact Person

at (_____) _____

Area Code

954.427.4770

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

2020 MAR 28 PM 8:23

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 articles of dissolution.

1. The name of the company is: GIRLS DREAM LLC
2. The document number of the company is L19000026439
3. The effective date the Dissolution was filed is 3/13/2020
4. The revocation of dissolution was authorized on 3/13/2020
5. A copy of the Articles of Dissolution is attached.

Maria Maia

Signature of person authorized to submit the revocation of dissolution

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

State of Florida

Department of State

I certify from the records of this office that GIRLS' DREAM LLC was a limited liability company organized under the laws of the State of Florida, filed on January 25, 2019, effective January 24, 2019.

The document number of this limited liability company is L19000026439.

I further certify that said limited liability company was voluntarily dissolved on March 13, 2020.

*Given under my hand and the Great Seal of
Florida, at Tallahassee, the Capital, this the
Fourteenth day of March, 2020*



Ronald R. De

Secretary of State

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<https://efile.sunbiz.org/certauthver.html>