# N19000034493

(Re	questor's Name)	<del></del>
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(Cit	y/State/Zip/Phone	e #)
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#### COVER LETTER'

TO:	Registration Section Division of Corporations		
CIID I	ECT: At Sea Designs		
SUDJ	Name of Lir	nited Liability Cor	npany
	aclosed Statement of Revocation of Dissolution ted for filing.	n for Florida Limit	ted Liability Company and fee(s) are
Please	return all correspondence concerning this ma	tter to:	
Melis	sa McCartney		
	Contact Person		_
At Se	a Designs		
	Firm/Company		_
817 S	e 2nd Ave 515		
	Address		-
Fort L	auderdale, FL 33316		
	City, State and Zip Code		_
	a@seafarerscookbook.com		
Е	mail address: (to be used for future annual rep	oort notification)	_
For fu	rther information concerning this matter, pleas	se call:	
Melis	sa McCartney	at (	617-8626
	Name of Contact Person	Area Code	Daytime Telephone Number

#### **Mailing Address:**

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

1,

### **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.	At Sea Designs The name of the company is:
2.	L19000034493 The document number of the company is
3.	The effective date the Dissolution was filed is
4.	April 5, 2022  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)