

L190000 80609

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

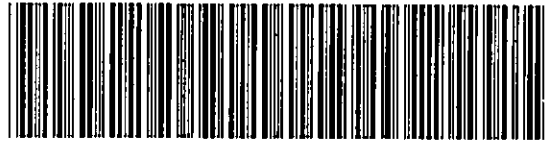
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE A-TEAM PAINTING 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:

LUIS J ORTEGA

\_\_\_\_\_  
Contact Person

THE A-TEAM PAINTING LLC

\_\_\_\_\_  
Firm/Company

8416 DELL LAGO CIR APT 104

\_\_\_\_\_  
Address

TAMPA FL 33614

\_\_\_\_\_  
City, State and Zip Code

ATEAMPAININGLLC@GMAIL.COM

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

For further information concerning this matter, please call:

LUIS J ORTEGA

\_\_\_\_\_  
Name of Contact Person

at ( 813 ) 862-6068

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

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

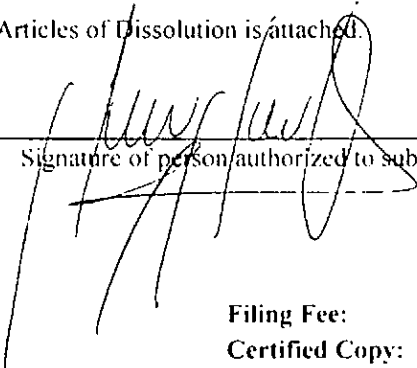
**Street Address:**

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: THE A-TEAM PAINTING LLC
2. The document number of the company is L19000080609
3. The effective date the Dissolution was filed is 11/19/2019
4. The revocation of dissolution was authorized on 11/19/2019
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)

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DIVISION OF CORPORATE &  
2019 DEC -2 AM 8:56

**FILED**  
**Nov 19, 2019**  
**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:

**THE A-TEAM PAINTING LLC**

The document number of the limited liability company: L19000080609

The file date of the articles of organization: March 22, 2019

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

NOT BUSSINESS GOING ON

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

**JOHNNY CUPITRA**  
**8430 DEL LAGO CIR, 101**  
**TAMPA, FL 33614**

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: **JOHNNY CUPITRA**

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Electronic Signature of authorized person