# L19000173259

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S. PRATHER

### COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Champion PTAC, LLC		
Name of Lin	nited Liability Cor	npany
The enclosed Statement of Revocation of Dissolution submitted for filing.	n for Florida Limit	ed Liability Company and fee(s) are
Please return all correspondence concerning this mat	iter to:	
Tina Whitney		
Contact Person		-
Champion PTAC, LLC		
Firm/Company		_
4720 NW 15th Avenue, Unit 4A		
Address	<u> </u>	_
Fort Lauderdale, FL 33309		
City, State and Zip Code		_
accounting@champion-glass.net		_
E-mail address: (to be used for future annual rep	oort notification)	
For further information concerning this matter, pleas		
Tina Whitney	954 at (	) 564-3435 Daytime Telephone Number
Name of Contact Person	Area Code	Daytime Telephone Number
Mailing Address:		Street Address:
Registration Section		Registration Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		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.

l.	Champion PTAC, LLC The name of the company is:		
2.	The document number of the company is	20	
3.	8/1/2022	2022 AUG -	.1
4.	0/1/2022	. 40	
5.		PM 3: 04	·
	Signature of person authorized to submit the revocation of dissolution		

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

#### FILED Aug 01, 2022 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:

CHAMPION PTAC, LLC

The document number of the limited liability company: L19000173259

The file date of the articles of organization: July 15, 2019

The effective date of the dissolution if not effective on the date of filing: August 2, 2022

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

CHANGED CORPORATE NAME

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

CHRIS GORMAN 4720 NW 15TH AVENUE, UNIT 4A FORT LUADERDALE, FL 33309

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: CHRIS GORMAN

Electronic Signature of authorized person