

12/21/22, 10:47 AM

Division of Corporations

**L19000200523**

Florida Department of State  
Division of Corporations  
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**LLC REVOCATION OF DISSOLUTION  
DC AUTO CONCIERGE LLC**

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DEC 22 2022

11:11 AM

**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: DC AUTO CONCIERGE LLC
2. The document number of the company is L19000200523
3. The effective date the Dissolution was filed is 11/28/2022
4. The revocation of dissolution was authorized on 12/19/2022
5. A copy of the Articles of Dissolution is attached.

*Carloa McKnight*

\_\_\_\_\_  
Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00  
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CR2E132 (7/0/15)

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FILED

FILED  
Nov 28, 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:

DC AUTO CONCIERGE LLC

The document number of the limited liability company: L19000200523

The file date of the articles of organization: August 6, 2019

The effective date of the dissolution if not effective on the date of filing: November 28, 2022

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

IN NOVEMBER 2022 I BECAME AWARE THAT MY NAME HAD BEEN ADDED TO DC AUTO CONCIERGE LLC WITHOUT MY CONSENT. I DID NOT GIVE CONSENT TO BE ADDED TO THIS ORGANIZATION NOR DID I SIGN ANY PAPERWORK TO THAT EFFECT.

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

DESTAH OWENS - ROWENS & CO LLC  
11501 DUBLIN BLVD SUITE 200  
DUBLIN, CA 94568 US

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: DESTAH OWENS

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Electronic Signature of authorized person