

L19000214153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

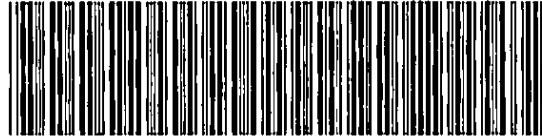
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FL

SEP 22 2020

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Lovely Nails 9 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:

Johnson Van

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

Lovely Nails 9 LLC

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

18150 NW 2nd Ave

\_\_\_\_\_  
Address

Miami, Florida, 33169

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

johnsonvan65@gmail.com

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

For further information concerning this matter, please call:

Johnson Van

at ( 305 ) 399-2972

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

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

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

**Mailing Address:**

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

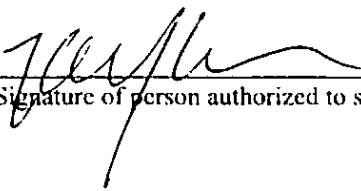
**Street Address:**

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: Lovely Nails 9 LLC
2. The document number of the company is L19000214153
3. The effective date the Dissolution was filed is 8/24/2020
4. The revocation of dissolution was authorized on 8/25/2020
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)

CR2E132 (10/15)

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TALLAHASSEE, FL

## 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:

LOVELY NAILS 9 LLC

The document number of the limited liability company: L19000214153

The file date of the articles of organization: August 21, 2019

The effective date of the dissolution if not effective on the date of filing: August 24, 2020

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

MADE CLERICAL MISTAKE. BUSINESS IS NOT AN LLC, BUT A SOLE PROPRIETERSHIP.  
RECEIVED NOTIFICATION OF DISSOLUTION FROM DIVISION OF CORPORATIONS.

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

JOHNSON VAN  
16353 SW 44TH ST  
MIAMI, FL 33185 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: JOHNSON VAN

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Electronic Signature of authorized person