49000245702

| (Re | questor's Name) | |
|-------------------------|-------------------|-----------|
| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2020 JUL 31 PH 12: 19

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COVER LETTER

| Division of Corporations | |
|---|--|
| SUBJECT: SANTE PAM LLC Name of Limited Liability Cor | |
| Name of Limited Liability Cor | |
| The enclosed Statement of Revocation of Dissolution for Florida Limit submitted for filing. | ed Liability Company and feets) are |
| | |
| Please return all correspondence concerning this matter to: | |
| MIR (INE FOURROW) | _ |
| Contact Person | |
| SANTE PAM Firm/Company | _ |
| Firm/Company | |
| 633 NE 167th St puite 826 Address | _ |
| Address | |
| North Hismi Black FL 33162 City, State and Zip Code | _ |
| | |
| E-mail address: (to be used for future annual report notification) | _ |
| For further information concerning this matter, please call: | |
| | , 417 2054 |
| MIR (INE FOURFAN at 904 Name of Contact Person Area Code | Daytime Telephone Number |
| Mailing Address | Street Address |
| Mailing Address: Registration Section | Street Address: 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.

| 1. | The name of the company is: SANTERAMLLC |
|----|--|
| 2. | The document number of the company is <u>L19000245702</u> |
| 3. | The effective date the Dissolution was filed is $\frac{6/9/20}{}$ |
| 4. | The revocation of dissolution was authorized on $\frac{7/30/20}{}$ |
| 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)

FILED
2020 JUL 31 PM 12: 19

CR2E132 (10/15)

FILED Jun 09, 2020 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:

SANTE PAM LLC

The document number of the limited liability company: L19000245702

The file date of the articles of organization: September 30, 2019

The effective date of the dissolution if not effective on the date of filing: June 9, 2020

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

SANTE PAM WILL BECOME A NON-PROFIT ORGANIZATION.

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

MIRLINE FOURRON 1403 FOX RUN DR TARPON SPRINGS, FL 34689 UN

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: MIRLINE FOURRON

Electronic Signature of authorized person