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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Land Mame of Limited Liability Con	ay LLC mpany
The enclosed Statement of Revocation of Dissolution for Florida Limi submitted for filing.	ted Liability Company and fee(s) are
Please return all correspondence concerning this matter to:	
Lary Velley Contact Person	_
Firm/Company	_
1005 NE 103 RD AVE	_
Okeechchee, Fl 34974 City. State and Zip Code	_
E-mail address: (to be used for future annual report notification)	<u>c</u> m
For further information concerning this matter, please call:	
Name of Contact Person at (863 Area Code	Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E132 (10/15)

Tallahassee, FL 32314

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: Larry M Kelley LC
	,
2.	The document number of the company is
3.	The effective date the Dissolution was filed is 2/19/2021
4.	The revocation of dissolution was authorized on $3/2/202/$
5.	A copy of the Articles of Dissolution is attached.
	Say Olden
	Signature of person authorized to submit the revocation of dissolution

Filing Fee:

\$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)