

L200000002670

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

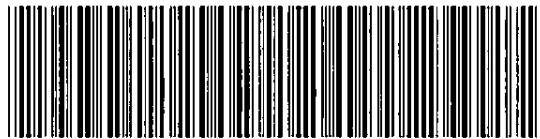
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/06/24 - 01016--021 **130.00

SD
2024-03-07 PM 3:39
STATE
TALLAHASSEE, FL

A. HUNT
03/06/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Blankenship's Aluminum Gates, 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:

Michael Blankenship Jr

Contact Person

Blankenship's Aluminum Gates, LLC

Firm/Company

6025 E. Turner Camp Rd

Address

Inverness, FL 34453

City, State and Zip Code

bcustomgates@gmail.com

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

For further information concerning this matter, please call:

Michael Blankenship Jr

at (352) 651-2887

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.

- Blankenship's Aluminum Gates, LLC
1. The name of the company is: _____
- L20000002670
2. The document number of the company is _____
- December 11, 2023
3. The effective date the Dissolution was filed is _____
4. The revocation of dissolution was authorized on 3-4-2024 ✓
5. A copy of the Articles of Dissolution is attached.

FILED
MAR 12 - 7
PM 3:39
CLERK OF STATE
TALLAHASSEE, FL


Signature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00
Certified Copy: \$30.00 (optional)

FILED
Dec 11, 2023
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:

BLANKENSHIP'S ALUMINUM GATES, LLC

The document number of the limited liability company: L20000002670

The file date of the articles of organization: December 20, 2019

The effective date of the dissolution if not effective on the date of filing: December 11, 2023

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

CHANGE OF DIRECTION

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

MICHAEL BLANKENSHIP JR
7544 E. RINGER CT
INVERNESS, FL 34453

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: MICHAEL BLANKENSHIP JR

Electronic Signature of authorized person

2023 DEC 11 PM 3:39
STATE OF FLORIDA
SECRETARY OF STATE

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000002670

Entity Name: BLANKENSHIP'S ALUMINUM GATES, LLC

Current Principal Place of Business:

6025 E TURNER CAMP RD
INVERNESS, FL 34453

Current Mailing Address:

6025 E TURNER CAMP RD
INVERNESS, FL 34453 US

FEI Number: 84-3703561

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLANKENSHIP, MICHAEL
6025 E TURNER CAMP RD
INVERNESS, FL 34453 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL BLANKENSHIP

04/17/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title PRESIDENT
Name BLANKENSHIP, MICHAEL
Address 6025 E TURNER CAMP RD
City-State-Zip: INVERNESS FL 34453

FILED
2023 APR -7 PM 3:39
CLERK OF STATE
TALLAHASSEE, FL

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL BLANKENSHIP

PRESIDENT

04/17/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date