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(Requestor's Name)				
(Address)				
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2024 HAR 19 PH 2: 47 SEGRETARY 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:

THE BEST STEP LLC

The document number of the limited liability company: L20000193265

The file date of the articles of organization: July 7, 2020

The effective date of the dissolution if not effective on the date of filing: December 5, 2023

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

DID NOT UTILIZE

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

RODDERICA L COLEMAN 6026 NW 27TH TER GAINESVILLE, FL 32653

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: RODDERICA L COLEMAN

Electronic Signature of authorized person

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: THE BEST STEP LLC	
2.	The document number of the company is L200000193265	
3.	The effective date the Dissolution was filed is $\frac{12 \psi 5 23}{}$	2024 HAR SECRET
4.	The revocation of dissolution was authorized on 23/04/24	120 P
5.	A copy of the Articles of Dissolution is attached.	E1 FL 2: 41
	Signature of person authorized to submit the revocation of dissolution	

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: THE BEST STEP LLC Name of Limited Liability Co	ompany
The enclosed Statement of Revocation of Dissolution for Florida Limsubmitted for filing.	ited Liability Company and fee(s) are
Please return all correspondence concerning this matter to:	
RODDERICA L. CULEMAN Contact Person	_
Firm/Company	_
6026 NW 27TH TERRACE Address	2024 MAR SECRE TAUL
GAINESVILLE FL 32653 City. State and Zip Code	2024 MAR 19 PH 2: 47 SECRETARY OF STATE TALLAMS SSEL FL
the best steplic agmall. com E-mail address: (to be used for future annual report notification)	2: 47
For further information concerning this matter, please call:	
RODDERI CA COLEMAN at (904 Area Code	<u>2910-04410</u> Daytime Telephone Number
Mailing Address:	Street Address:
Davistantian Castian	Donistration Coation

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303