

L21 0000 61506

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PROSPER COLLECTIONS 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:

DLERO WILSON

Contact Person

Firm/Company

17126 38TH RD N

Address

LOXAHATCHEE, FL 33470

City, State and Zip Code

dlrowilson769@gmail.com

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

For further information concerning this matter, please call:

Dlero Wilson

at (561) 821-1897

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.

PROSPER COLLECTIONS LLC

1. The name of the company is: _____
2. The document number of the company is _____ L21000061506
3. The effective date the Dissolution was filed is _____ 10/26/2023
4. The revocation of dissolution was authorized on _____ 1/05/2023
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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