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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

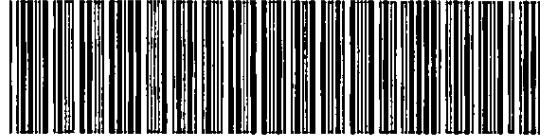
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 NOV 28 AM 8:36

STATE
CLERK

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Social With Amanda

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:

Amanda Maxim

Contact Person

Social With Amanda

Firm/Company

7541 Biltmore Dr

Address

Sarasota, FL 34231

City, State and Zip Code

hello@socialwithamanda.com

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

For further information concerning this matter, please call:

Amanda Maxim

at (330) 430-9511

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

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**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: Social With Amanda
2. The document number of the company is 1.21000425008
3. The effective date the Dissolution was filed is 10/17/2022
4. The revocation of dissolution was authorized on 11/20/2022
5. A copy of the Articles of Dissolution is attached.

Amanda Marx

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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2022 NOV 28 AM 8:36
CLERK OF COURT
STATE OF FLORIDA

FILED
Oct 17, 2022
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:

SOCIAL WITH AMANDA LLC

The document number of the limited liability company: **L21000425008**

The file date of the articles of organization: **September 28, 2021**

The effective date of the dissolution if not effective on the date of filing: **October 17, 2022**

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

CHANGED BUSINESS NAME

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

**AMANDA MAXIM
7541 BILTMORE DR
SARASOTA, FL 34231**

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: **AMANDA MAXIM**

Electronic Signature of authorized person