# 121000 941550

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
(-1), -1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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11.07

13/25/21

## COVER LETTER

TO:	Registration Section Division of Corporations				
SURII	ECT: AWAKENME US				
0020.	Name of Lim	ited Liability Cor	mpany		
	closed Statement of Revocation of Dissolution ted for filing.	for Florida Limi	ted Liability Comp	any and fee(s) are	
Please	return all correspondence concerning this matt	er to:			
Kriste	n Grandon				
	Contact Person		_		
AWA	KENME US				
	Firm/Company	-	_		
9442 5	W Libertas Way			·	
	Address		_		
Port S	Lucie, FL 34987				
-	City, State and Zip Code	<u> </u>	<del>-</del>	-	
Kriste	n@AwakenMe.Us				
E-	mail address: (to be used for future annual repo	ort notification)	_		
For fur	ther information concerning this matter, please	call:			
Kriste	n Grandon	at (	916-0443		
	Name of Contact Person	Area Code	Daytime Tele	phone 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 81		
	rananassee, FL 32314		Tallahassee, Fl		

# STATEMENT OF REVOCATION OF DISSOLUTION 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.

	AWAKENME US			
1.	The name of the company is:			_
2.	L21000441550 The document number of the company is			
	March 4, 2024			
3.	The effective date the Dissolution was filed is		7- 1	
			•	
4.	March 4, 2024 The revocation of dissolution was authorized on			
			•	
5.	A copy of the Articles of Dissolution is attached.		<del>-</del> - :	
	/*		<del>-:</del> :	
	Grusten Grandon	· · ·	07	
	Signature of person authorized to submit the revocation of dissolution			

Filing Fee:

\$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

#### FILED Mar 04, 2024 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:

AWAKENME.US LLC

The document number of the limited liability company: L21000441550 ,

The file date of the articles of organization: October 8, 2021

The effective date of the dissolution if not effective on the date of filing: March 4, 2024 :

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

OUR BUSINESS IS TOO SMALL TO SUSTAIN LLC EXPENSES.

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

KRISTEN GRANDON 9442 SW LIBERTAS WAY PORT ST LUCIE, FL 34987

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: KRISTEN GRANDON

Electronic Signature of authorized person