

L22000083228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

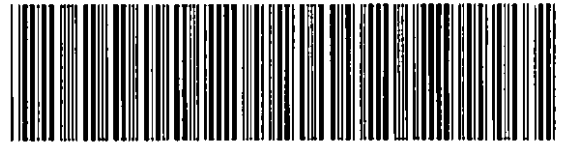
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2023 APR 24 PM 0:28

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PM CLEAN 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:

PRISCILLA FONTES MONTEIRO

Contact Person

PM CLEAN LLC

Firm/Company

123 SW 15TH ST

Address

DEERFIELD BEACH, FL. 33441

City, State and Zip Code

PRIFONTES@HOTMAIL.COM

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

For further information concerning this matter, please call:

NAIARA

Name of Contact Person

+1 954-832-2360

at (_____) _____

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

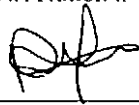
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 JAN 24 PM 2:08

**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.

- PM CLEAN LLC
1. The name of the company is: _____
- 1.22000083228
2. The document number of the company is _____
- 04/04/2023
3. The effective date the Dissolution was filed is _____
- 04/20/2023
4. The revocation of dissolution was authorized on _____
5. A copy of the Articles of Dissolution is attached.
- 2023 APR 21 PM 3:28



Signature of person authorized to submit the revocation of dissolution

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