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## **COVER LETTER**

TO:	Registration Section Division of Corporations		
SHRIE	ECT: Invest with Us, LLC		
30001	Name of Lim	ited Liability Cor	npany
	closed Statement of Revocation of Dissolution ted for filing.	for Florida Limi	ted Liability Company and fee(s) are
Please	return all correspondence concerning this matt	er to:	
John P	alazzotto		
	Contact Person		_
Invest	with Us, LLC		
**********	Firm/Company		_
393 De	cauville Loop		
	Address		_
Naples	Florida 34114		
	City, State and Zip Code		<del></del>
	tegrityinvestors.us		
E-1	mail address: (to be used for future annual repo	ort notification)	_
For fur	ther information concerning this matter, please	call:	
John P	alazzotto	925 at (	382-8538
	Name of Contact Person	Area Code	Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303

CR2E132 (10/15)

## 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.

l.	The name of the company is:
2.	The document number of the company is
3.	November 12th 2024 The effective date the Dissolution was filed is
4.	November 15, 2024 The revocation of dissolution was authorized on
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)

124 NOV 26 PM 4: 21 ECRETARY OF STATI TALLAHASSEE, FL