L22 000 33 7240

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

Office Use Only



200412945112

07/29/23--01009--025 **100.00



COVER LETTER

то:	Registration Section Division of Corporations	
SUBJI	FCT: INNOVATIVE RESEARCH LLC	
.,,,,,,,,,,	Name of Limited Liability Cor	npany
	nclosed Statement of Revocation of Dissolution for Florida Limit tted for filing.	ed Liability Company and fee(s) are
Please	return all correspondence concerning this matter to:	
S	álvio Ernesto Aguilera Cruz / Yanet Bonet Gongora	
7	Contact Person High Manager	2023 JUL 28 AM II: 23 SECHE FART DE STATI TALL ATTAS SEE, FL
-	Firm/Company	
15381	Southwest 11th Street	ASSE
	Address	11. 2 11. 2
Miam	i. FL 33194	「景· 讼
	City, State and Zip Code	_
	eac@gmail.com -mail address: (to be used for future annual report notification)	_
For fu	rther information concerning this matter, please call:	
Silvio	Aguilera Cruz at (7862665027
	Name of Contact Person Area Code	Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, 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.

1.	INNOVATIVE RESEARCH LLC The name of the company is:		, , , , , , , , , , , , , , , , , , , 	
2.	L22000337260 The document number of the company is			_
3.	The effective date the Dissolution was filed is	SECE	2023 JI	
4.	06/01 2023 The revocation of dissolution was authorized on		JUL 28 1	
5.	· ·	OF STATE	AM 11: 23	
	Signature of person authorized to submit the revocation of dissolution			_

Filing Fee:

\$100,00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)