

L22000509937

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

(Document Number)

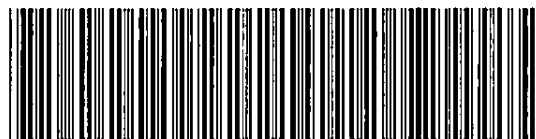
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2024 APR -3 PM12:58  
TOLSON, D. C. 113

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** KNITTING GONE BLIND 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:

Mackenzie Newman

Contact Person

Knitting Gone Blind LLC

Firm/Company

1903 Quaker Ridge Dr

Address

Green Cove Springs, FL 32043

City, State and Zip Code

knittinggoneblind@gmail.com

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

For further information concerning this matter, please call:

Mackenzie Newman

at ( 904 ) 540-5120

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

**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.

- KNITTING GONE BLIND LLC
1. The name of the company is: \_\_\_\_\_
- L22000509937
2. The document number of the company is \_\_\_\_\_
- 01/12/2024
3. The effective date the Dissolution was filed is \_\_\_\_\_
- 01/12/2024
4. 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

**FILED**  
2024 APR -3 PM 12:58  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

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

**FILED**  
**Jan 12, 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:

**KNITTING GONE BLIND LLC**

The document number of the limited liability company: **L22000509937**

The file date of the articles of organization: **December 5, 2022**

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

**I AM NO LONGER INTERESTED IN OWNING AN LLC.**

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

**MACKENZIE  
NEWMAN  
GREEN COVE SPRINGS, FL 32043 US**

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: **MACKENZIE ROSE NEWMAN**

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Electronic Signature of authorized person