

L23000035796

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

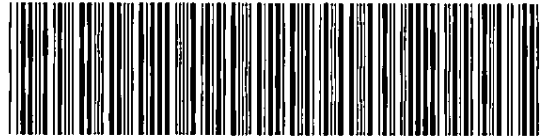
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TALLAHASSEE, FL

AB

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MAS TAXES 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:

Bongny Martienz

\_\_\_\_\_  
Contact Person

MAS TAXES LLC

\_\_\_\_\_  
Firm/Company

4455 Baymeadows Rd Suite 105

\_\_\_\_\_  
Address

Jacksonville FL 32217

\_\_\_\_\_  
City, State and Zip Code

gyovanna@llcamas.com

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

For further information concerning this matter, please call:

Ronney Martinez

at ( 888 ) 651-3274

\_\_\_\_\_  
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

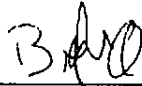
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SECRETARY OF STATE  
TALLAHASSEE, FL

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. The name of the company is: MAS TAXES LLC
2. The document number of the company is 1.23000035796
3. The effective date the Dissolution was filed is 10/03/2024
4. The revocation of dissolution was authorized on 10/31/2024
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)

FILED  
Oct 03, 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:

MAS TAXES LLC

The document number of the limited liability company: L23000035796

The file date of the articles of organization: January 19, 2023

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

BUSINESS NEVER OPERATED.

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

BONGNY MARTINEZ MOSQUEDA  
3604 ALTA LAKES BLVD  
JACKSONVILLE, FL 32226 UN

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: BONGNY MARTINEZ MOSQUEDA

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Electronic Signature of authorized person



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 10, 2024

BONGNY MARTIENEZ  
4455 BAYMEADOWS RD  
SUITE 105  
JACKSONVILLE, FL 32217

SUBJECT: MAS TAXES LLC  
Ref. Number: L23000035796

We have received your document for MAS TAXES LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$100.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler  
Regulatory Specialist II

Letter Number: 224A00026688

12-27-24