

L23 000 138703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

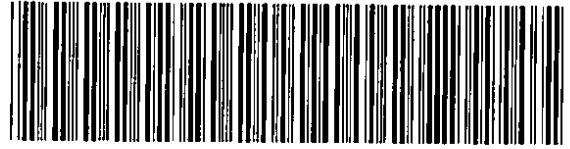
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2023 OCT 10 11:59

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SCP CONCRETE 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:

Rubi Morquecho

Contact Person

Moher Solutions, LLC

Firm/Company

4496 Arch Creel Drive

Address

Jacksonville FL 32257

City, State and Zip Code

rubi@mothersolutions.net

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

For further information concerning this matter, please call:

Rubi Morquecho

at ( 904 )

993-9492

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:**

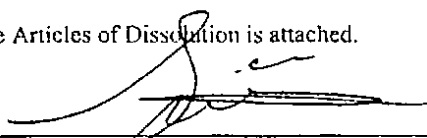
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

2023 OCT 10 PM 6:59

**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.

- SCP CONCRETE LLC
1. The name of the company is: \_\_\_\_\_
- L23000138703
2. The document number of the company is \_\_\_\_\_
- 08/28/2023
3. The effective date the Dissolution was filed is \_\_\_\_\_
- 08/31/2023
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

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

2023.08.10 10:11:59