## L240000099509

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## COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: The Produce Spot LLC		
Name of Li	mited Liability Cor	npany
The enclosed Statement of Revocation of Dissolution submitted for filing.	m for Florida Limi	ted Liability Company and fee(s) are
Please return all correspondence concerning this ma	tter to:	
Douglas Habe		
Contact Person	,	_
The Produce Spot		
Firm/Company		_
3480 nw 27th ave. Unit E6		
Address		_
Pompano Beach, FL 33069		
City, State and Zip Code		_
producespotlle@gmail.com		_
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this matter, plea	se call:	
Rebecca Napoli	754 at (	3176426
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

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.

1,	The Produce Spot LLC The name of the company is:
2.	L24000099509 The document number of the company is
3.	5/16/2024 The effective date the Dissolution was filed is
4.	The revocation of dissolution was authorized on
5.	A copy of the Articles of Dissolution is attached.
	regnature of person authorized to submit the revocation of dissolution

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)