

L24000190796

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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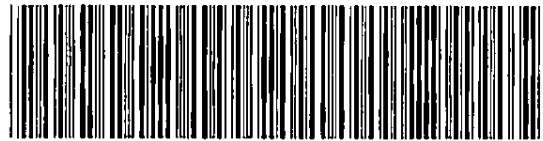
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/20/24--01024--004 \*100.L3

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24 SEP 20 AM 9:58  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** AUTO REPAIR MOBILE MECHANIC 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:

Donna Morales

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

D&E Multiservices Corp

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

2510 9th ST W

\_\_\_\_\_  
Address

Lehigh Acres FL 33971

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

dcypressinsurance@gmail.com

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

For further information concerning this matter, please call:

Donna Morales

\_\_\_\_\_  
Name of Contact Person

at ( 239 ) 2813940

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

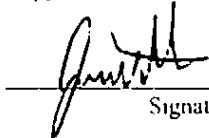
**Street Address:**

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.

1. The name of the company is: AUTO REPAIR MOBILE MECHANIC LLC
2. The document number of the company is L24000190796
3. The effective date the Dissolution was filed is 09/06/2024
4. The revocation of dissolution was authorized on 09/06/2024
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)**

CR2E132 (10/15)

FILED  
24 SEP 20 AM 9:58  
CLERK OF COURT  
JULIA MASSELL, CLERK  
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JULIA MASSELL, CLERK  
CLERK OF COURT  
JULIA MASSELL, CLERK

FILED  
Sep 06, 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:

AUTO REPAIR MOBILE MECHANIC LLC

The document number of the limited liability company: L24000190796

The file date of the articles of organization: April 23, 2024

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

OPENED IN ERROR - NOT GENERATING INCOME

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

LILIANE SOUTO  
4109 18TH ST SW  
LEHIGH ACRES, FL 33976 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: LILIANE SOUTO

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Electronic Signature of authorized person