

P10 0000004701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

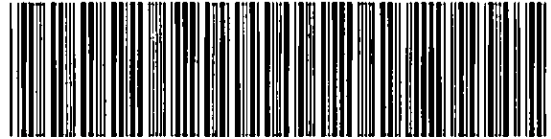
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/26/21--01013--013 **35.00

*Revocation of
dissolution*

2021 OCT 26 AM 11:45
CLERK OF STATE
OF ARIZONA

FILED

A. RAMSEY

NOV 05 2021

RAFAEL J. SANCHEZ-ABALLI PA

264 ALMIRIA AVENUE
CORAL GABLES, FLORIDA 33134
TELEPHONE (305) 779-5041 • FACSIMILE (305) 779-5047
EMAIL rsa@sanchez-aballi.com • www.sanchez-aballi.com

October 25, 2021

VIA FEDERAL EXPRESS

Florida Department of State
Division of Corporations, Registration Section
2415 North Monroe Street, Suite 810
Tallahassee, Florida 32303

Re: Articles of Revocation of Dissolution for Llama Associates, Inc.
Document Number: P10000004701

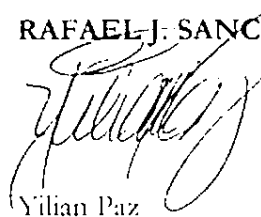
Sir/Madam:

Enclosed please find an original Articles of Revocation of Dissolution in connection with Llama Associates, Inc. and check number 1175 in the amount of \$35.00 to cover the filing fees for the Articles of Revocation of Dissolution.

Should you have any questions, please do not hesitate to contact us.

Very truly yours,

RAFAEL J. SANCHEZ-ABALLI P.A.



Yilian Paz

/yp
Enclosures as stated

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Llaima Associates, Inc.

DOCUMENT NUMBER: P10000004701

The enclosed *Articles of Revocation of Dissolution* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rafael Sanchez-Aballi

Name of Contact Person

Rafael J. Sanchez-Aballi, P.A.

Firm/Company

264 Almeria Avenue

Address

Coral Gables, Florida 33134

City/State and Zip Code

rsa@sanchez-aballi.com

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

For further information concerning this matter, please call:

Rafael Sanchez-Aballi

Name of Contact Person

At (305) 779-5041

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is enclosed)

Mailing Address:

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

Street Address:

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

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation 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:

FIRST: The name of the corporation is: Llaima Associates, Inc.

SECOND: The document number of the corporation (if known) is P10000004701

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution

filed with the Florida Department of State is October 20, 2021

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FOURTH: The Revocation of Dissolution was authorized on October 21, 2021

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☒ The board of directors/incorporation revoked the dissolution.
- ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☐ The shareholders revoked the dissolution and was authorized by the shareholders in the manner required by this chapter and by the articles of incorporation.

SIXTH: A copy of the Articles of Dissolution is attached.

Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

Rafael Sanchez-Baller

(Typed or printed name of person signing)

Arthur and S. J. W. H.

(Title of person signing)

FILING FEE \$35

ARTICLES OF DISSOLUTION

Signature: NICOLAS GUZMAN CRUZAT PRESIDENT
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative