

1P20000016346

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

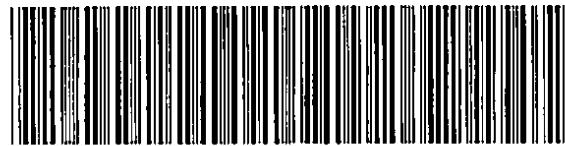
(Business Entity Name)

(Document Number)

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

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JUN 28 2023

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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: CABANAS TRANSPORTATION INC
2. The document number of the company is P20000016346
3. The effective date the Dissolution was filed is 02/13/2023
4. The revocation of dissolution was authorized on 03/31/2023
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)

COVER LETTER

TO: Registration Section  
Division of Corporations

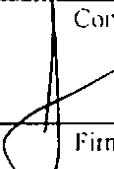
SUBJECT: CABANAS TRANSPORTATION INC  
Name of Limited Liability Company

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:

JAVIER CABANAS

Contact Person

Firm/Company

5800 West 9th Ct

Address

HIALEAH FL 33012

City, State and Zip Code

JAVIERCABA1@YAHOO.COM

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

For further information concerning this matter, please call:

JAVIER CABANAS

Name of Contact Person

at (786)

Area Code

474-7292

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

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