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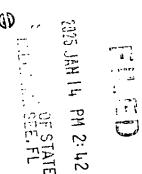
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COVER LETTER

TO: Registration Section Division of Corpor					
SUBJECT: HITECH ENT	ERPRISES				
	Name of Limit	ted Liability Cor	npany		
The enclosed Statement of F submitted for filing.	tevocation of Dissolution f	for Florida Limi	ted Liability Company a	ind fee(s) are	
Please return all correspond	ence concerning this matte	r to:			
PRATIK PATEL					
(Contact Person		_		
HITECH ENTERPRISES					
	Firm/Company		_		
8346 COPPERWOOD LN					
	Address		_		
JACKSONVILLE, FL -322	16				
City	State and Zip Code		_		
pratikdp241@gmail.com				@ , B	
E-mail address: (to be u	sed for future annual repor	1 notification)	_		•
For further information conc	erning this matter, please (call:			
PRATIK PATEL		954 at (2999644		
Name of Contact Po	erson	Area Code	Daytime Telephone	Number OF STATE	Company of the second
Mailing Address Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations		Street Address: Registration Section Division of Corpor The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32	ations ahassee treet, Suite 810	

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:
2.	L25000000931 The document number of the company is
3.	The effective date the Dissolution was filed is
4.	January 08, 2025 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

\$100.00

Certified Copy: \$30.00 (optional)

Filing Fee:

CR2E132 (10/15)