

L10000110122

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

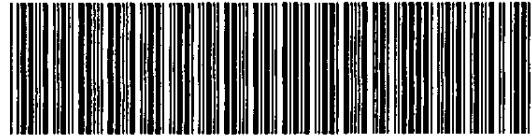
(Business Entity Name)

(Document Number)

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FILED
11 AUG 17 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan AUG 18 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEOFAT INDIA, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Revocation of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GUS PAPATHANASOPOULOS
Name of Person

NEOFAT INDIA, LLC
Firm/Company

8763 PISA DR. #5212
Address

ORLANDO, FL 32810
City/State and Zip Code

GUS@NEOFAT.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GUS PAPATHANASOPOULOS at (407) 739-5804
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$100 Filing Fee \$105 Filing Fee & Certificate of Status \$130 Filing Fee & Certified Copy \$135 Filing Fee, Certificate of Status & Certified Copy


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ARTICLES OF REVOCATION OF DISSOLUTION 11 AUG 17 AM 11:56
FOR
FLORIDA LIMITED LIABILITY COMPANY SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to section 608.4411, 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 NEOFAT INDIA, LLC
2. The document number of the company is L10000110122
3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was FILED ON 8/1/2011.
4. The revocation of dissolution was authorized in the same manner as the dissolution on 8/15/2011.

Signatures of the members having the same percentage membership interests necessary to approve the revocation of dissolution:

Signature	Typed or Printed Name
	<u>GUS PAPATHANASOPOULOS</u>
_____	_____
_____	_____
_____	_____

Filing Fee: \$100.00