

L1800008111

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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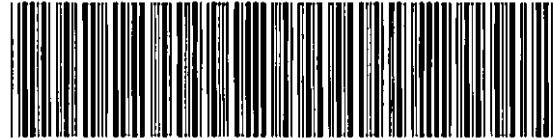
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FL
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Florida Residential Consultants 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:

Carlos M. Juan

Contact Person

Florida Residential Consultants LLC
Firm/Company

8215 N. Lois Ave

Address

Tampa, FL 33614

City, State and Zip Code

Carlos @ FRC ENERGY.COM

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

For further information concerning this matter, please call:

Carlos M. Juan

Name of Contact Person

at (813)

Area Code

966 - 1503

Daytime Telephone Number

Mailing Address:

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

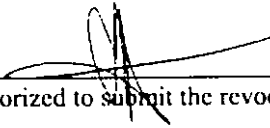
Street Address:

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: Florida Residential Consultants LLC
2. The document number of the company is L18 0000 8111
3. The effective date the Dissolution was filed is 12/29/2020
4. The revocation of dissolution was authorized on 1/20/2021
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)

FILED
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CLERK OF STATE
TALLAHASSEE, FL