L10000098847

(Req	uestor's Name)			
(Add	ress)			
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(City/State/Zip/Phone #)				
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SECRETARY OF STATE

Follows DEC 18 1014

December 11, 2014

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

Dear Sir or Madam:

Please know that I would like to revoc my dissolution for my LLC, document number L10000098847.

I was going to move to California to be with my boyfriend, but he broke off the relationship, and I will not be moving and will keep my business in Florida.

Thank you for your help and apologies for any inconveniences.

Krista Kraynak

7leashes@gmail.com

904-755-2312

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ect: Theashes	S LLC
		d Liability Company
	aclosed Statement of Revocation of Dissolution for the for filing.	r Florida Limited Liability Company and fee(s) are
Please	return all correspondence concerning this matter	to:
	Krista Krayna Contact Person	<u></u>
	740SMS VC Firm/Company	
	5290 Big Island	or #1214 (Formerly) 4041 Dover Rd Jax FL 32207)
 	Jackson Tule Fl City, State and Zip Code	
E	MICASMES @ arraul. (mail address: (to be used for future annual report	notification)
For fu	rther information concerning this matter, please c KNSTA Kraunak Name of Contact Person	all: at 909 155 2312 Area Code Daytime Telephone Number
	STREET 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, FL 32314

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: The SOS LLC	 		
2.	The document number of the company is			
3.	The effective date the Dissolution was filed is 12 8 22 4	~		
4.	The revocation of dissolution was authorized on 12/11/4		<u></u>	
5.	A copy of the Articles of Dissolution is attached.			
	Signature of person authorized to submit the revocation of dissolution			
CB3E12	Filing Fee: \$100.00 Certified Copy: \$30.00 (optional)	SECRETARY OF ST	14 DEC 15 PM 3:	Har area Branch
CR2E13	72 (2/14)	SIATE LORIDA	58	

State of Florida Department of State

I certify from the records of this office that 7LEASHES LLC was a limited liability company organized under the laws of the State of Florida, filed on September 21, 2010, effective September 21, 2010.

The document number of this limited liability company is L10000098847.

I further certify that said limited liability company was voluntarily dissolved on December 8, 2014, effective December 22, 2014.

Given under my hand and the Great Seal of Florida, at Tallahassee, the Capital, this the Tenth day of December, 2014

Secretary of State



Authentication ID: 000267246250-121014-L10000098847

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html