

L11000026366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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

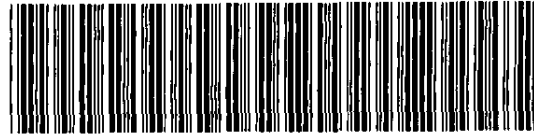
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**L. SELLERS**

AUG 16 2011

**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 AUG 12 PM 3:11

FILED

Division of Corporations

SUBJECT: S & R Brooklyn Crest  
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:

Joseph Goldman  
Name of Person

S & R Brooklyn Crest  
Firm/Company

2550 Okeechee bld.  
Address

W.P.B. FL 33409  
City/State and Zip Code

Jmg303@bellsouth.net  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joe Goldman at (561) 667-4997  
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

CR2E097 (8/05)

## FLORIDA LIMITED LIABILITY COMPANY

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 S+R Brooklyn crust
2. The document number of the company is \_\_\_\_\_
3. The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State was  
6-6-11
4. The revocation of dissolution was authorized in the same manner as the dissolution on 7-1-11

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

Signature

[Signature]

Typed or Printed Name

Joe Goldman

Filing Fee: \$100.00

CR2E097 (8/05)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA