12000079710

(Requestor's Name)
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Special Instructions to Filing Officer: Req. Original date of Fic. as Alid date in order to the Rev. of Doss with 120 days.
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AM 8/4/14

COVER LETTER

Division of Corporations		
SUBJECT: Northstar Consulting Service	es, LLC	
Name of L	imited Liability Con	ppany
The enclosed Statement of Revocation of Dissolut submitted for filing.	ion for Florida Limit	ed Liability Company and fee(s) are
Please return all correspondence concerning this n	natter to:	
Patricia Garrabrant		
Contact Person		-
Northstar Consulting Services, LLC		
Firm/Company		-
6355 La Costa Dr. Apt. C		
Address		-
Boca Raton, FL 33433		
City, State and Zip Code		-
pgarrabrant@gmail.com		
E-mail address: (to be used for future annual r	eport notification)	_
For further information concerning this matter, ple	ease call:	
Patricia Garrabrant	at (561	212-5457
Name of Contact Person	Area Code	Daytime Telephone Number
STREET ADDRESS: Registration Section Division of Corporations Clifton Building		MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallabassee, FL 32314

Tallahassee, Florida 32301

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.

۱.	Northstar Consulting Services, LLC The name of the company is:
2.	L12000079710 The document number of the company is
3.	The effective date the Dissolution was filed is
4.	The revocation of dissolution was authorized on
5.	A copy of the Articles of Dissolution is attached. 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)

CR2E132 (2/14)