L/6000031764

(Requestor's Name)
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PICK-UP WAIT MAIL
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K. SALY FEB 21 2017

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: FOR HIS GORY Name of Limited L	PROFESSIONAL SERVICES, LL C.
The enclosed Statement of Revocation of Dissolution for F submitted for filing.	lorida Limited Liability Company and fee(s) are
Please return all correspondence concerning this matter to:	
Daniel L Gloven	-
FOR HIS GLORY PROFES	STOWAL SERVICES LLC
1189 West 30 87	<u>- </u>
JASCK SOMVIIIC FL City, State and Zip Code	, 32209
Dani al Gover 222 @ C E-mail address: (to be used for future annual report no	mallocom ification)
For further information concerning this matter, please call:	
Name of Contact Person at (904, 290-0093 Area Code Daytime Telephone Number
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, 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.

1.	The name of the company is: FOR H. S. GLORY PROFESSIONAL SERVICES LLC
2.	The document number of the company is $8/-1418666$
3.	The effective date the Dissolution was filed is $12 - 19 2046$
4.	The revocation of dissolution was authorized on $2 - 15 - 2017$
5.	A copy of the Articles of Dissolution is attached. Daniel August

Filing Fee: \$100.00

Signature of person authorized to submit the revocation of dissolution

Certified Copy: \$30.00 (optional)