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DATE: 12/20/18

NAME: GS GROUP SERVICES LLC

TYPE OF FILING: REVOCATION OF DISSOLUTION

COST: 100.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: _____ GS GROUP SERVICES 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:

Vanessa Calhoun

Contact Person

Parasec

Firm/Company

2804 Gateway Oaks Dr #100

Address

Sacramento, CA 95833

City, State and Zip Code

riops@parasec.com

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

For further information concerning this matter, please call:

Vanessa Calhoun	800 at (854-8534
Name of Contact Person	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

CR2E132 (10/15)

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.

		GS GROUP SERVICES LLC	
1.	The name of the company is:		

2. The document number of the company is _____L16000129079

3. The effective date the Dissolution was filed is _____10/18/2018

4. The revocation of dissolution was authorized on _____

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)

> 2018 DEC 20 AM 11: 21 SECRETARY OF STATE

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