

L17000034106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 MAR -6 PM 4:19

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K. SALY

MAR - 8 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AGH MEDICAL CODING AND BILLING 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:

ARIADNA GARCIA

Contact Person

AGH MEDICAL CODING AND BILLING SERVICES, LLC.

Firm/Company

15440 SW 68 LN

Address

MIAMI FL 33193

City, State and Zip Code

agarcia76@bellsouth.net

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

For further information concerning this matter, please call:

ARIADNA GARCIA

Name of Contact Person

at (305) 490-6893

Area Code

Daytime Telephone Number

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

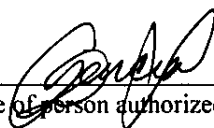
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**STATEMENT OF REVOCATION OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: AGH MEDICAL CODING AND BILLING SERVICES, LLC
2. The document number of the company is L17000034106
3. The effective date the Dissolution was filed is 2/23/17
4. The revocation of dissolution was authorized on 2/28/17
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)