

M13000004829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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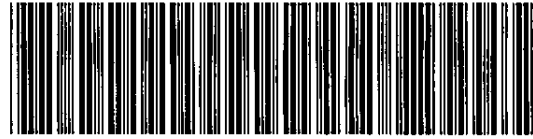
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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JUL 08 2014  
J. HARRIS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** North Shore Risk Consulting, LLC.  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert T Lynch.  
(Name of Person)

North Shore Risk Consulting, LLC.  
(Firm/Company)

68 South Service Road, Suite 100  
(Address)

Melville, N.Y 11747.  
(City/State and Zip Code)

For further information concerning this matter, please call:

Robert T Lynch at ( 516 ) 659-9851  
(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:**

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

**NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY**

North Shore Risk Consulting, LLC  
(Name of limited liability company)

New York  
(Jurisdiction of its organization)

8/1/2013  
(Date registered with Florida Department of State)

M 13000004829  
(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Robert T Lynch  
(Signature of authorized representative)

Robert T Lynch  
(Typed or printed name of signee)

Filing Fee: \$25.00

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