

M13000004829

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

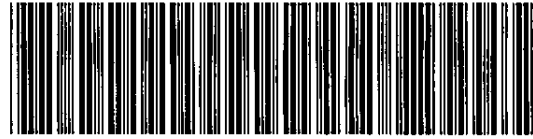
(Business Entity Name)

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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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