## L12 000100 P95

(Re	questor's Name)				
(Ad	dress)	•			
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(City/State/Zip/Phone #)					
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SECRETARY OF STATE
TALLAHASSEE FLORID

J. Shivers DEC 1 5 2014

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## **COVER LETTER**

SUBJECT:	Professional Roof Services L (Name of	LC Limited Liability Compa	ny)
The enclosed A	Articles of Dissolution and fee(s) are s	ubmitted for filing.	
Please return a	Il correspondence concerning this mat	tter to the following:	
	Joel Israel		
		(Name of Person)	
		(Firm/Company)	
	2617 Center Avenue		
		(Address)	***************************************
	Fort Lauderdale, FL 33308	3	
	(C	City/State and Zip Code)	
For further info	ormation concerning this matter, pleas	e call:	
Joe	l Israel	954	567-8942
	(Name of Person)		ode & Daytime Telephone Number)

\$25.00 Filing Fee and Certificate of Dissolution

Enclosed is a check for the following amount:

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

**MAILING ADDRESS:** 

## STREET/COURIER ADDRESS:

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

**▼** \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liabil Professional Roof Serv						
2.	The Articles of Organizatio	n were filed on August 6, 2012	2	and assigned			
	document number L12000	100895					
3.	The delayed effective date t	he dissolution if not effective on date cannot be prior to or more than 90 of	the date of filing: days later than date d	filing: 12/12/2014  date document is received for filing)			
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).						
	End of Business Opera	tions	<del></del> .				
			· · · · · · · · · · · · · · · · · · ·				
	· · · · · · · · · · · · · · · · · · ·	······································		<del></del>			
	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Joel Israel						
		2617 Center Avenue		JAL SE			
		Fort Lauderdale, FL 33308	3	OEC - I	frank d		
_				SEE E	i i		
6. lis	Signature of an authorized parties above to wind up the cor	person or if there are no members, inpany's activities and affairs:	, the signature of	the person appointed and	( i		
•	101.0	7 Joel I:	sraei	N.			
	Signature	30011	Printed	Name			

**FILING FEE: \$25.00**