

L17000164234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

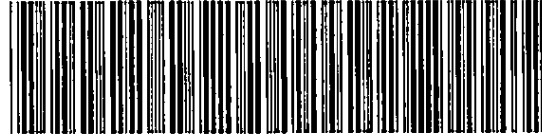
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN - 8 PM 2: 29

✓ SALY
JAN - 9 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Dive IN Residential and Commercial Pool Cleaning Service
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter N Giambrone
(Name of Person)

(Firm/Company)

112 LAUREL WOOD WAY UNIT 103
(Address)

Saint Augustine FL 32086
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Giambrone at (904) 584-0880
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

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

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 JAN -8- PM 2:23

1. The name of a limited liability company is

DUE IN RESIDENTIAL AND COMMERCIAL POOL CLEANING SERVICES, LLC

2. The Articles of Organization were filed on August 1, 2017 and assigned

document number L17000164234

3. The delayed effective date the dissolution if not effective on the date of filing: JAN 10, 2018
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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).

I HAVE NOT ACQUIRED ANY CLIENTS AND
FEEL FINANCIALLY BURDENED WITH THE
COMPANY AT THIS TIME.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Peter Giambone
112 LAUREL WOOD WAY
UNIT 103
ST. AUGUSTINE FL 32086

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:


Signature

PETER N GIAMBONE
Printed Name

FILING FEE: \$25.00