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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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07 AUG -9 PM 12: 52
SECRETARY UF STATE
TALLAHASSEE. FLORID

· COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: All Seasons Insulation LLC (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:	
John Joseph Borelli (Name of Person)	07 AUG -9 SECRETAR
All Seasons Insulation LLC (Firm/Company)	Ltd
1417 Oak Hill Drive (Address) St. Augustine, Florida 32080 (City/State and Zip Code)	PH 12: 52 OF STATE E. FLORIDA
For further information concerning this matter, please call: John Joseph Borelli	Number)
Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certificate Certificate (additional copy is enclosed)	0 Filing Fee. Ite of Status & I Copy nal copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 STREET/COURIER A Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 9, 2007

JOHN JOSEPH BORELLI 1417 OAK HILL DRIVE ST. AUGUSTINE, FL 32080

SUBJECT: ALL SEASONS INSULATION, LLC

Ref. Number: L03000048247

07 AUG -9 PH 12: 53
SECRETARY OF STATE

We have received your document for ALL SEASONS INSULATION, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Document Specialist

Letter Number: 607A00048873

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The date the dissolution was approved: A description of occurrence that resulted in the limited li 608.441, Florida Statutes, (copy 608.441 on back cover li No longer in operation.	iability company's di	 ssolution pursuant to sectio	
A description of occurrence that resulted in the limited li 608.441, Florida Statutes, (copy 608.441 on back cover li	iability company's di	ssolution pursuant to sectio	
	ietter).		n
		SEC	3
	•	AHA	5
		XXX Y) j
NO. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10			
. CHECK ONE:		LOR	5
All debts, obligations and liabilities of the limite	ed liability company l	三元 八	d.
OR- Adequate provision has been made for the debts			
. All remaining property and assets have been distributed a rights and interests.	among its members in	accordance with their resp	ective
CHECK ONE:			
There are no suits pending against the company	in any court.		
OR- Adequate provision has been made for the satisf entered against it in any pending suit.	faction of any judgme	nt, order or decree which n	ıay be
natures of the members having the same percentage of men	nbership interests nec	essary to approve the disso	lution:
Signature		Printed Name	
West agent Ch	John Jos	eph Borelli	
) ' '			
<u></u>			

FILING FEE: \$25.00