

L 04 0 00000892

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

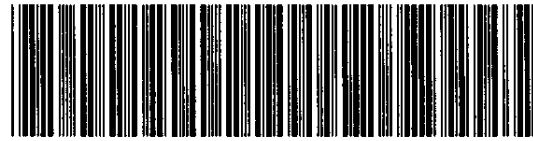
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/28/14--01015--024 **25.00

J. Shivers JAN 31 2013

14 JAN 28 PM 12:02
FIDELITY & SECURITY
CORPORATION

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FIRST COAST SPECIALTY MAINTENANCE
(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:

ROCKE JAMES BROWN
(Name of Person)

(Firm/Company)

P.O. Box 17034
(Address)

Jacksonville, FL 32245
(City/State and Zip Code)

For further information concerning this matter, please call:

Rocke J. Brown at (904) 610-3320
(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**

1. The name of a limited liability company is

FIRST COAST SPECIALTY MAINTENANCE

2. The Articles of Organization were filed on 01/05/2004 and assigned document number _____

3. The delayed effective date the dissolution if not effective on the date of 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).

Economy went to hell, business fizzled out.

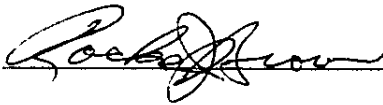
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

ROCKE J. BROWN
P.O. Box 17034
Jacksonville, FL 32245

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

Printed Name



ROCKE J. BROWN

FILING FEE: \$25.00

RECEIVED
FEBRUARY 11 2004
16 JAN 28 PM 10:02
TALLAHASSEE, FL 32309-0001