

LO4 0000002094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

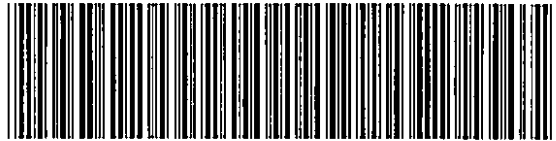
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2018 AUG 24 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Professional Drapery Installation
(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:

Toni D. Franklin (spouse of Douglas R Franklin)
(Name of Person)

Professional Drapery Installation, LLC
(Firm/Company)

813 Copper Ridge Dr.
(Address)

Cantonment, FL 32533
(City/State and Zip Code)

For further information concerning this matter, please call:

Toni D. Franklin at (850) 485-8956
(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

1. The name of a limited liability company is

Professional Drapery Installation 2018 AUG 24 PM 3:52

2. The Articles of Organization were filed on

SECRETARY OF STATE
TALLAHASSEE, FL

document number L04000002094 unable to locate

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

(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Date of Death 8-26-17

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).

Death of Sole proprietor (Douglas R. Franklin)

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

Toni D. Franklin

813 Copper Ridge Dr.

Cantonment, FL 32533

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:

Toni D. Franklin

Signature

Toni D. Franklin

Printed Name

FILING FEE: \$25.00