

LO40000013873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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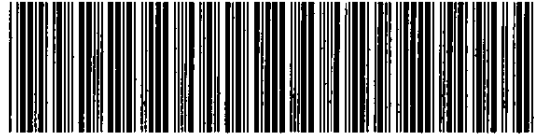
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUL -9 PM 2:36

B. Tardock JUL 10 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jon Olivieri WAUCOVERING INST. LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

JON OLIVIERI
(Name of Person)

JON OLIVIERI WAUCOVERING INST. LLC
(Firm/Company)

744 INNSBRUCK DR.
(Address)

ORLANDO FL. 32825
(City/State and Zip Code)

For further information concerning this matter, please call:

JON OLIVIERI at (407) 282-1466
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| ☒ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee &
Certificate of Status | ☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | ☐ \$60.00 Filing Fee,
Certificate of Status &
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**

SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 JUL - 98 PM 2:36

1. The name of a limited liability company is

JON OLIVIERI WAUQUOVERING INST. LLC

2. The Articles of Organization were filed on FEB. 20 2004 and assigned document number

L04000013873

3. The date the dissolution was approved: MARCH 12 2008

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

HEALTH PROBLEMS

5. **CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. **CHECK ONE:**

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Jon Olivieri

Printed Name

JON OLIVIERI