## LD400056850

(Rec	questor's Name)	
(Address)		
(Ada	lress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
. (Bus	iness Entity Nar	ne)
(Document Number)		
Certified Copies	: · Certificatès	s of Status
Special Instructions to Filing Officer:		
į.		

Office Use Only

G. MCLEOD

AUG 1 1 2009

EXAMINER



200159214792

08/10/09--01018--010 \*\*25.00

09 AUG 10 AH 8: 4.0

SECRETARY OF LATE OIVISION OF CARE AND A

## COVER LETTER

Division of Corporations			
SUBJECT: GATOR HOME SERVICES LIC			
(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:			
CARY KREPER (Name of Person)			
GATOR HOWE SERVICES, LLC			
(Firm/Company)			
6208 JATPUR COURT			
BOYNTON SEACH, FLORIDA 3343 7 (City/State and Zip Code)			
For further information concerning this matter, please call:			
CHARLY KRIPER at (561) 635-8136 (Name of Verson) (Area Code & Daytime Telephone Number)			
Enclosed is a check for the following amount:  \$\sum_{25.00}\$ \text{Filing Fee}   \text{30.00 Filing Fee & Quadratic of Status}  \text{Certificate of Status}  \text{Certificate of Status & Quadratic of Status}  \text{Certificate of Status & Quadratic of Status}  \text{Certificate of Status}   \text{Certificate of Status}  \text{Certificate of Status}  \text{Certificate of Status}  \text{Certificate of Status}  \text{Certificate of Status}  \text{Certificate of Status}  \text{Certificate of Status} \qu			
(additional copy is enclosed) Certified Copy (additional copy is enclosed)			

**MAILING ADDRESS:** 

TO:

Registration Section

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  SATOK HOME SERVI	CES, LLC
2. The Articles of Organization were filed on Au HL0400056850.	GUST 12004 and assigned document number
3. The date the dissolution was approved: Aug	xst 7, 2009.
4. A description of occurrence that resulted in the line 608.441, Florida Statutes, (copy 608.441 on back bilds 50/udio) a member	nited liability company's dissolution pursuant to section cover letter).
5. CHECK ONE:	
-OR-	e limited liability company have been paid or discharged. e debts, obligations and liabilities pursuant to s. 608.4421.
<ol><li>All remaining property and assets have been distr rights and interests.</li></ol>	ibuted among its members in accordance with their respective
7. CHECK ONE:  There are no suits pending against the co	mpany in any court.
OR- Adequate provision has been made for the entered against it in any pending suit.	e satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Day Kupu	Gary Kuiper
<u> </u>	
<del></del>	