

L 04000078087

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

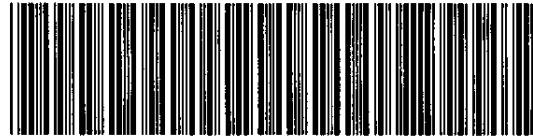
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



900262456069

07/23/14--01013--017 **25.00

EFFECTIVE DATE

9/1/14

FILED
14 JUL 23 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ERA 7/23/14

EFFECTIVE DATE 9/1/14
COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Discount Home Inspections 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 A. Santaniello
(Name of Person)
Discount Home Inspections LLC
(Firm/Company)
2634 Northampton Ave
(Address)
Orlando, FL 32828
(City/State and Zip Code)

For further information concerning this matter, please call:

John Santaniello at (321) 662-0284
(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

Discount Home Inspections LLC

2. The Articles of Organization were filed on OCT 27, 2004 and assigned

document number L04000078087

3. The delayed effective date the dissolution if not effective on the date of filing: SEPT 1 2014
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

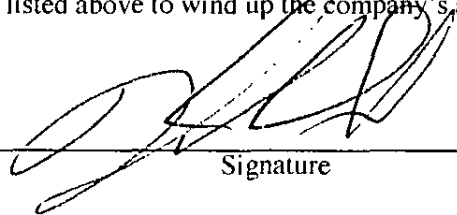
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

A dissatvility that prevents job performance
tasks.

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

John Santanico
2634 Northampton Ave
Orlando, FL 32828

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

John Santanico
Printed Name

FILING FEE: \$25.00

FILED
14 JUL 23 PM 12:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA