## L05000036865

(Requestor's Name)
(Address)
(Address)
(riddic555)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Office Use Only

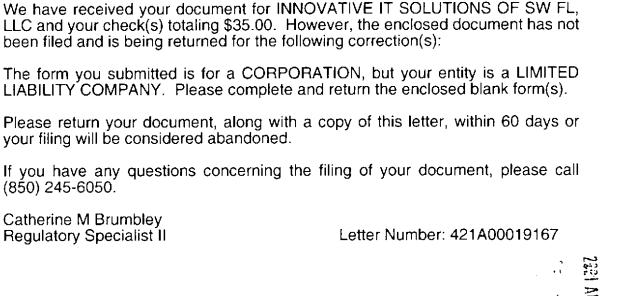


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## www.sunbiz.org

FLORIDA DEPARTMENT OF STATE **Division of Corporations** 

August 12, 2021

JOHN MACKO

(850) 245-6050.

Catherine M Brumbley Regulatory Specialist II

FT MYERS, FL 33908

Ref. Number: L05000026865

18226 CREEKSIDE PRESERVE LOOP # 202

SUBJECT: INNOVATIVE IT SOLUTIONS OF SW FL, LLC

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: INNOVATIVE IT	ited Liability Company)
(Native of Line	ned Elabinty Company)
The enclosed Articles of Dissolution and fee(s) are subm Please return all correspondence concerning this matter t	
John Macko	
I HUOVATIVE IT Sol	HOUS OF SWFL LLC irm/Company)  Preserve Loop #Joh (Address)
18226 creekside	Preserve Loop #Joh
	EL 33 908 State and Zip Code)
For further information concerning this matter, please ca	
John HACKO (Name of Person)	at (189) Jo7 - 1718  (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 &
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahussee 2415 N. Monroe Street, Suite 810

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  INNOVATIVE IT SOLV FIONS OF SWFL LLC
2.	THE Articles of Organization were filed on 8 16/2005  The Articles of Organization were filed on 8 16/2005
	1-0500076865
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)  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 pursuint to Setion 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	ASSES B
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 Macao
	1824 creekside presenve Loop #dod
	1824 creekside presenve Loop #dod Font luyens, FL 33908
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:
	John Macho
	Signature Printed Name

FILING FEE: \$25.00