L05000037140

(Re	equestor's Name)	
(Address)		
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL.
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

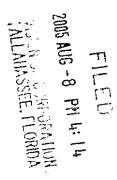
Office Use Only



700057263887

07/26/05--01017--007 **43.75

08/09/05--01003--004 **60.00



J. BRYAN JUL 2 Y 2005



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 29, 2005

ANTHONY LAS CASAS CONSTRUCTION ADVISORY SERVICES, LLC 6286 FOSTER ST JUPITER, FL 33458

SUBJECT: CONSTRUCTION ADVISORY SERVICES, LLC

Ref. Number: L05000037140

We have received your document for CONSTRUCTION ADVISORY SERVICES, LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 005A00049339

Joey Bryan Document Specialist PH 4: 14

PH 4: 14

EE, FLORIDA

TRANSMITTAL LETTER

	ration Section on of Corporations			
SUBJECT:	Construction Advisory Services, LLC (Name of Limited Liability Company)			
The enclosed A	rticles of Dissolution and fee(s) are submitted for filing.			
Please return all	correspondence concerning this matter to the following:			
	Anthony Las Casas (Name of Person) Anthony Las Casas (Name of Person)			
	(Firm/Company)			
	6284 Foster St (Address)			
(Address)				
(Address) Tup'ter FL 33458 (City/State and Zip Code)				
(City/State and Zip Code)				
For further information concerning this matter, please call:				
	Arthony Las Casas at (56) 779-9388 (Area Code & Daytime Telephone Number)			
Enclosed is a chec	ck for the following amount:			
□ \$25.00 Filing I	Fee \$\Bigcup \\$30.00 \text{ Filing Fee & Certificate of Status}\$\$ \[\begin{array}{cccccccccccccccccccccccccccccccccccc			

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	
Construction Adv	sory Services, LLC.
2. The date the dissolution was approved:	sory Services, LLC.
3. A description of the occurrence that resulted in section 608.441, Florida Statutes, (copy of 608.	the limited liability company's dissolution pursuant to 441 on back of cover letter).
chose not to persu	20
	LAE TE
•	SSEE
	FLOOR H.
	900 F
All debts, obligations and liabilities of the limite -OR- Adequate provision has been made for the debts	ed liability company have been paid or discharged. , obligations and liabilities pursuant to s. 608.4421.
All remaining property and assets have been dis respective rights and interests.	tributed among its members in accordance with their
CHECK ONE: There are no suits pending against the company -OR- Adequate provision has been made for the satisf be entered against it in any pending suit.	•
Signatures of the members having the same percethe dissolution:	ntage of membership interests necessary to approve
Signature	Typed or Printed name Anthony Las Casas