

L05000059174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

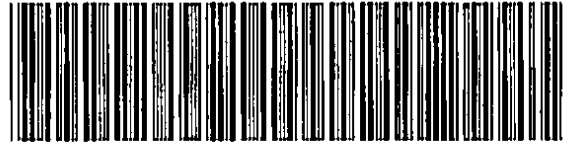
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/31/22 - 0100 - 025 6400.00

2022 NOV 21 AM 11:54  
ALL INFORMATION

FEB 18 2023

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Flight Support Services, 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:

Matthew Callander

(Name of Person)

Flight Support Services, LLC

(Firm/Company)

4507 Illicium Drive

(Address)

Palm Beach Gardens, FL 33418

(City/State and Zip Code)

For further information concerning this matter, please call:

Matthew Callander

(Name of Person)

561

3191602

at ( )

(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

2022 NOV 21 AM 11:55  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Flight Support Services, LLC

2. The Articles of Organization were filed on 06/14/2005 and assigned

document number L05000059174

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 pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Owner is retiring from the business and has decided to cease operations.

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

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:

 11/19/2022  
Signature

Matthew Callander

Printed Name

**FILING FEE: \$25.00**