

LOS000086721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers MAY 05 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Select Property Management 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:

Rachel Wagoner, Esq

(Name of Person)

Law Office of Gerald R Colen, P.A.

(Firm/Company)

7243 Bryan Dairy Rd

(Address)

Largo FL 33777

(City/State and Zip Code)

For further information concerning this matter, please call:

Rachel Wagoner

(Name of Person)

at ( 727 ) 545-8114  
(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

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