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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
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PICK-UP WAIT MAIL		
(Business Entity Name)		
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(Document Number)		
Certified Copies Certificates of Status		
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Special Instructions to Filing Officer:		
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SECRETARY OF STATIONS
DIVISION OF CORPORATIONS

OG MAY -6 PM 2: 06

T. HAMPTON

MAY - 7 2009

**EXAMINER** 

# **COVER LETTER**

Division of Corporations		
SUBJECT: DEVOE DRAFTING SERVICE 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:		
THERESA D. EROELL (Name of Person)		
Peloe Drafting Service LLC (Firm/Company)		
6067 CARDIFF AVENUE		
COCOA FLORIDA 32927 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Theresa D. Kroelf at (321) 298-3148 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:  \$\sum_{\text{\$\coloredge}}\$25.00 \text{ Filing Fee & Gertificate of Status}\$  \$\sum_{\text{Certified Copy}}\$\$  \$\sum_{\text{Certified Copy}}\$\$  \$\sum_{\text{Certificate of Status}}\$\$  \$\sum_{\text{Certified Copy}}\$\$  \$\sum_{\text{Certificate of Status}}\$\$		
(additional copy is enclosed) Certified Copy (additional copy is enclosed)		

# MAILING ADDRESS:

TO:

Registration Section

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 SECRETARY OF STATE DIVISION OF CORPORATIONS FOR A LIMITED LIABILITY COMPANY 09 MAY -6 PM 2: 06

1. The name of a limited liability company is	
Devoe Drafting Service	LLC.
2. The Articles of Organization were filed on	9-02-2005 and assigned document number
3. The date the dissolution was approved:	20-09
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back	mited liability company's dissolution pursuant to section cover letter).
Lack of Business requ	ireing the closing of Company
5. CHECK ONE:	
G-OR-	ne limited liability company have been paid or discharged.  ne debts, obligations and liabilities pursuant to s. 608.4421.
<del>_</del> · ·	ributed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the co	ompany in any court.
Adequate provision has been made for the entered against it in any pending suit.	ne satisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage	of membership interests necessary to approve the dissolution:
Signature	Printed Name
Theread Ynall	Theresa D. Kroell