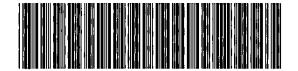
L05000108107

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

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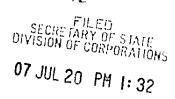
T. Hempton | | | 9 3 2007

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Handi-Services of the Villa	ages, LLC	
(Name of Limited L	ability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted f	or filing.	
Please return all correspondence concerning this matter to the f	following:	
Fraderick D. Dublin		
Frederick R. Dublin	Person)	
	,	
Handi-Services of the Vi		
. (Firm/Co	mpany)	
519 Timmonsville Way		
(Addr	ess)	
The Villages, Florida 32	162	
·(City/State an	d Zip Code)	
For further information concerning this matter, please call:		
Frederick R. Dublin	at (352) 751-2775	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
Certificate of Status	55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations	STREET/COURIER ADDRESS: Registration Section Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY



The name of a limited liability company is Handi-Services of the Villages, LLC			
2. The Articles of Organization were filed on November 7, 2005 and assigned document number L05000108107			
3. The date the dissolution was approved: June 15, 2007			
 A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter). The tornado that hit Lady Lake and the Villages in February of 2007 caused nearly 			
four months of of scheduled jobs to be canceled with no new business booked.			
This has resulted in the need for the company to be closed. We are no longe			
in business and therefore need to file this request to disolve the company.			
5. CHECK ONE:			
All debts, obligations and liabilities of the limited liability company have been paid or discharged. OR- Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.			
All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.			
7. CHECK ONE:			
There are no suits pending against the company in any court. OR- Adequate provision has been made for the satisfaction of any judgment, order or decree which may be			
entered against it in any pending suit.			
Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:			
Signature / / / Printed Name			
Frederick R. Dublin			
Barbara J. Duflin Barbara J. Dublin			
Rebecca C. Dublin			