## L060000001964

SECRETARY OF STATE TALLAHASSES, FLURIDA

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

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2006 JUH 12 P 3: 02

TALLAHASSEE, FLORIE.

March 20, 2006

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RICHARD B. CROUSE EA GVC FINANCIAL INC. 978 DOUGLAS AVE. SUITE 102 ALTAMONTE SPRINGS, FL 32714

SUBJECT: BRITT MICHAEL HANDYMAN SERVICES LLC

Ref. Number: L06000011964

We have received your document for BRITT MICHAEL HANDYMAN SERVICES LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6094.

Letter Number: 206A00018839

Agnes Lunt Document Specialist

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TO: Registration Section Division of Corporations  SUBJECT: BRITT MICHAEL HANDYMAN SERVICES (LC)  (Name of Limited Liability Company)  The enclosed Articles of Amendarent and fee(s) are submitted for filling.  Please return all correspondence concerning this matter to the following:  REGISTERED AGENT  RICHARD B. CROUSE  (Name of Person)  STE 102  (Address)  ALTAMORIE SPRINGS, FL 32714  (City/State and Zip Code)  (City/State and Zip Code)  (City/State and Zip Code)  (Area Code & Daytime Telephone Norther)  Enclosed as a check for the following amount:  STEEL/COURSE (Status & Conflicted of Status & Conflicted Copy (additional copy is enclosed))  MAILING ADDRESS: STREET/COURSE ADDRESS:			COVI	ER LETTER	1009 JAN 15 B	3: 02
SUBJECT: BRITT MICHAEL HANDYMAN SERVICES LLC  (Name of Limited Liability Company)  The enclosed Articles of Amendation and fee(s) are submitted for filling.  Pleade return all correspondence concerning this matter to the following:  RESUSTERED ASENT.  RUCHAED B. CROUSE  (Name of Person)  GUC FINANCIPL INC  (Firm/Company)  578 DOUGLAS AVE SIE 102  (Address)  ATAMONIE SPRINGS, FL 32714  (City/State and Zip Code)  (City/State and Zip Code)  (Name of Person)  Enclosed to a check for the following amount:  S155.00 Filing Fee  Certificate of States  Certificate of States  MAILING ADDRESS:  STREET/COURIER ADDRESS:	_			T.	SECRETARY OF ST ALLAHASSEE, FLO	ATE RIDA
The enclosed Anticles of Amendic ent and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  REGISTERED ASENT  RICHARD B. CROUSE (Name of Person)  GUC FILIANCIAL INC (Firm/Company)  578 Douglas Ave Stello2 (Address)  ALTAMONIE SPRINGS, FL 32714 (Chy/State and 2ip Code) (Chy/State and 2ip Code) (Name of Person)  RICHARD CROUSE at U01, 331-0678 (Name of Person)  Enclosed as a check for the following amount:  [] \$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  STREET/COURIER ADDRESS:  STREET/COURIER ADDRESS:	SUBJECT:	BUTT	MICHAEL		_	
Please return all correspondence concerning this matter to the following:  REGISTERED ASENT  RICHARD B. CROUSE  (Name of Person)  GUC FINANCIAL INC  (Firm/Company)  578 Douglas Ave Stello2  (Address)  ALTAMONIE SPRINGS, FL 32714  (City/State and Zip Code)  (City/State and Zip Code)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  (Certificate of States)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  (Certificate of States)  (Area Code & Daytime Telephone Number)  Statisticate of States  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  (Certificate of States)  (Area Code & Daytime Telephone Number)  Statisticate of States (Area Code)  (Area Code & Daytime Telephone Number)  (Certified Copy (additional copy is enclosed)			(Name of Lim	ited Liability Company)		
REGISTERED PIGENT  RICHARD B. CROUSE (Name of Person)  GUC FINANCIAL INC  (Firm/Company)  578 Douglas Ave Stello2  (Address)  ALTAMONIE SPRINGS, FL 32714  (City/Stee and Zip Code)  (City/Stee and Zip Code)  (Area Code & Daytime Telephone Number)  Enclosed is a cheek for the following amount:  [1] \$25.00 Filing Fee  [2] \$30.00 Filing Fee & Certificate of Status  STREET/COURIER ADDRESS:	Tak erleteses	i Articles of Amenda:	ent and fee(s) are subn	nitted for filing.		
(Name of Person)  GUC FINANCIPL INC  (Firm/Company)  578 Dougues Ape Stello2  (Address)  Altamonte Springs, FL 32714  (City/State and Zip Code)  (City/State and Zip Code)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  S255.00 Filing Fee Certificate of Status  Certificate of Status  (Area Code & Daytime Telephone Number)  MAILING ADDRESS:  STREET/COURIER ADDRESS:	Please return	all correspondence co	oncerning this matter t	o the following:	ZGISTERED	AGENT:
GUC FINANCIPL INC  (Firm/Company)  578 Dougues Aue Stelloz  (Address)  ALTAMONTE SPRINGS, FL 32714  (City/State and Zip Code)  (City/State and Zip Code)  (Area Code & Daytime Telephone Number)  Enclosed is a check for the following amount:  [] \$25.00 Filing Fee [] \$30.01 Filing Fee & Certificate of Status  (additional copy is enclosed)  MAILING ADDRESS:  STREET/COURIER ADDRESS:		ar and which an installaction of the or states are	RICHAR			
For facther information concerning this matter, please call:    Richard Ceouse   at (40)   331 - 0678     (Name of Person)   (Area Code & Daytime Telephone Number)			,	,		
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\$25.00 Filing Fee  Certificate of Status Certificate of Status (additional copy is enclosed)  MAILING ADDRESS:  \$55.00 Filing Fee & S60.00 Filing Fee, " Certified Copy (additional copy is enclosed)  STREET/COURIER ADDRESS:		iNaine o	( Person)		ie Telephone Number)	
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Pagistration Section Pagistration Section	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Registration Section Divisior, of Corporations Ctifton Building 2661 Executive Center Circle		
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P.O. Box 6327. Chifton Building						
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ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1. The name of a firnited liability company is	2006 JUN 12 P 3: (
BRITT MICHAEL HANDIM	AN SERVICES LLECRETAGE
2. The Articles of Organization were filed on 2/2/ LOGOCO11964	and assigned document number
3. The date the dissolution was approved: 2/3	06
<ol> <li>A description of occurrence that resulted in the limited life 598,441, Florida Statutes, (copy 608,441 on back cover life.)</li> </ol>	ability company's dissolution pursuant to section letter).
Business Closed - Ne	ner Opened
CHECK AME.	
5. CHECK ONE:  All debts, obligations and fiabilities of the limite	d Bability company have been paid or discharged
OR-	, obligations and itabilities pursuant to s. 608.4421.
<ol> <li>All remaining property and assets have been distributed a rights and interests.</li> </ol>	• • • • • • • • • • • • • • • • • • • •
7. CHECK ONE:	
There are no suits pending against the company i	in any court.
	action of any judgment, order or decree which may be
natures of the members having the same percentage of mem	bership interests necessary to approve the dissolution:
Signature	Printed Name
Caryn Hoffman	CARYN HOFFMAN