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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
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Office Use Only



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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAY 1 2 2008

EXEMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: MADIG AN HOME TNSPECTION SERVICES LL (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:
MICHAEL MADIGAN (Name of Person)
MADIGAN HOME TNSPECTION SERVICES LLC (Firm/Company)
6781 BOTTLERZULW LANE (Address)
NARLES FL 3410A (City/State and Zip Code)
For further information concerning this matter, please call:
MIKE Made of Person) at (239) 682 B165 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

CTION SERVICES LLC.
and assigned document number
2-08
ed liability company's dissolution pursuant to section ver letter).
of organization or operating agreement, upon the ———limited liability company
mited liability company have been paid or discharged. ebts, obligations and liabilities pursuant to s. 608.4421.
ted among its members in accordance with their respective
any in any court.
atisfaction of any judgment, order or decree which may be
membership interests necessary to approve the dissolution:
Printed Name
MICHAEL MARIARN
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