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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: All Cabling Secuirty & Fire, 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:

Jodi L Harrison

(Name of Person)

All Cabling Security & Fire, LLC

(Firm/Company)

1444 Stormway Court

(Address)

Apopka, FL 32712

(City/State and Zip Code)

For further information concerning this matter, please call:

Jodi L Harrison

,407 \607-9

(Area Code & Daytime Telephone Num

(Name of Person)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status ρ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ρ \$60.00 Filing Fee,
Certificate of Straight &
Certified Copy 2 (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

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

						limited liability company i curity & Fire, LLC	
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solutio	ove the dis	to approv	ecessary to a	ship interests n	ercentage of mem	bers having the same perc	natures of the memb
	1	d Name	Printed N			re	Signature
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