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10 JAN 25 PM 4: 30 SECRETARY OF STATE

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CC&T SERVICES, 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:	
Powell E.Helm	
(Name of Person)	
CC&T SERVICES, LLC	
(Firm/Company)	
3900 COUNTY ROAD 675 EAST	
(Address)	
BRADENTON, FL 34211	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Powell Helm 746-1844	
(Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \( \sum_{\text{Certificate of Status}} \) 30.00 Filing Fee \( \text{Certified Copy} \) (additional copy is enclosed) \( \sum_{\text{Certified Copy}} \) (additional copy is enclosed)	
MAILING ADDRESS:  STREET/COURIER ADDRESS:  Desired the first section of the courier section	
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

1. The name of a limited liability company is CC&T SERVICES, LLC	
2. The Articles of Organization were filed on July 10700070313.	5 <sup>th</sup> , 3007 and assigned document number
<ul> <li>3. The date the dissolution was approved: Jan. 15th</li> <li>4. A description of occurrence that resulted in the limite 608.441, Florida Statutes, (copy 608.441 on back cov</li> </ul>	ed liability company's dissolution pursuant to section ver letter).
The service we were preforming	AIR NOT WULK OUT.
<ul> <li>OR-Adequate provision has been made for the defendence of the defendence of</li></ul>	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.  attisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of a signature	Printed Name  Printed Name  Printed Name  AHA: SEE, FLORIDA