# 0000074000

| (1                                      | Requestor's Name)       |        |
|---|-------------------------|--------|
|   | Address)                |        |
| (1                                      | , idurooo,              |        |
| (,                                      | Address)                |        |
| (1                                      | City/State/Zip/Phone #) |        |
| PICK-UP                                 | WAIT                    | MAIL   |
| (1                                      | Business Entity Name)   |        |
| . (                                     | Document Number)        |        |
| Certified Copies                        | Certificates of         | Status |
| Special Instructions to Filing Officer: |                         |        |
|   |                         |        |
|   |                         |        |
|   |                         |        |
|   |                         |        |
|   |                         |        |
| <del></del>                             |                         |        |

Office Use Only

G. MCLEOD

JUN - 9 2009

**EXAMINER** 



700156838017

06/08/09--01008--023 \*\*25.00

09 JUH -8 PH 12: UY

### **COVER LETTER**

| TO: Registration Section Division of Corporations  |  |  |  |
|--|--|--|--|
| SUBJECT: Vehicle Protection Services (CC. (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:  |  |  |  |
| Lisa D. Amato (Name of Person)   |  |  |  |
| · · · · · · · · · · · · · · · · · · ·  |  |  |  |
| Vehicle Protetion Services (Firm/Company)  |  |  |  |
| 101-N- Eola Dr. Apt-#3   |  |  |  |
| OY/ando, F1. 32801<br>(City/State and Zip Code)  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |
| (Name of Person) at (407) 864-3122 (Area Code & Daytime Telephone Number)  |  |  |  |
| Enclosed is a check for the following amount:  \$25.00 Filing Fee & S55.00 Filing Fee & Certificate of Status  \$55.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (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



09 JUN -8 PM 12: 09

|  | 02.2014 0 11.15.113   |
|--|---|
| 1. The name of a limited liability company is Venice trotection            | Services  |
| 2. The Articles of Organization were filed on <u>Section 70000 94000</u> . |   |
| 3. The date the dissolution was approved:                                  | 2009  |
|  | mited liability company's dissolution pursuant to section cover letter).  |
|  |   |
| 5. CHECK ONE:  | <del></del>   |
| OR-Adequate provision has been made for the                                | the limited liability company have been paid or discharged.  The debts, obligations and liabilities pursuant to s. 608.4421.  The debts among its members in accordance with their respective |
| rights and interests.  | ibuted among its members in accordance with their respective  |
| 7. CHECK ONE:  There are no suits pending against the co                   | mpany in any court  |
| -OR-   | ne satisfaction of any judgment, order or decree which may be   |
| Signatures of the members having the same percentage                       | of membership interests necessary to approve the dissolution:   |
| Signature  | Printed Name  |
| L. D. Amato  | <u> Cisa D. Amato</u>   |
| Valture  | Damon Marlette  |
|  |   |
| <u></u>  |   |
|  |   |