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G. MCLEOD

APR 11 2011

EXAMINER



300200821673

04/08/11--01032--028 \*\*25.00

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: STEPHEN CAPOVERD (Name of Limited L	E HANDYMAN SERVICES iability Company)	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
STEPHEN CAPO	VERDE Person)	
STEPHEN CAPOVEDOE HANDYMAN SERVICES (Firm/Company)		
23 490 MARISOL AVE		
PORT (HAIZ LOTTE FL. 33954 (City/State and Zip Code)		
For further information concerning this matter, please call:		
STEPHEW CA-POVERDE at (941) 769-9027  (Name of Person) (Area Code & Daytime Telephone Number)		
Englosed is a check for the following amount:		
Certificate of Status	55.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified 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

1. The name of a limited liability company is	_
STEPHEN CAPOVERDE HAW!	SYMAN SERVICES.
2. The Articles of Organization were filed on $\frac{4-4}{207000117880}$ .	2011 and assigned document number
3. The date the dissolution was approved: 4 A description of occurrence that resulted in the limited liabi	
4. A description of occurrence that resulted in the limited liabil 608.441, Florida Statutes, (copy 608.441 on back cover letter LACIL OF BUSINESS.	
5. CHECK ONE:	
All debts, obligations and liabilities of the limited li OR- Adequate provision has been made for the debts, ob	
<ol> <li>All remaining property and assets have been distributed amorights and interests.</li> </ol>	ong its members in accordance with their respective
7. CHECK ONE:  There are no suits pending against the company in a OR- Adequate provision has been made for the satisfaction entered against it in any pending suit.	
Signatures of the members having the same percentage of members	ship interests necessary to approve the dissolution:
Signature	Printed Name
Shift	STEPHEN CHPOVERDE
<u> </u>	ACC A
	ASS 8
was to the state of the state o	
FILING FEE: S	\$25.00 PM ~