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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: HVAC INSTAUERS C	L. L. C. I Liability Company)	
(Name of Limited	i Liability Company)	
The enclosed Articles of Dissolution and fee(s) are submitte	d for filing.	
Please return all correspondence concerning this matter to the	e following:	
STEVEN L. CRA	WFORD	
(1,411,511,715,715)		
HVAC INSTAU	LERS L.L.C.	
(Firm)	Company)	
9446 LAKE DOUGE	AL PUACE	
(A	ddress)	
_ OPLANDO FLORID		
(City/State	and Zip Code)	
For further information concerning this matter, please call:		
STEVE CRAWITURD	WO7 SM-1097	
(Name of Person)	at (<u>407</u>) <u>957-/09 Z</u> (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & 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
2.	The Articles of Organization were filed on 19 WARCH ZOO 8 and assigned
	document number <u>L08000028783</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 1 MAY 2815 (effective date cannot be prior to or more than 90 days later than date document is received for filing)
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter). **RETIREMENT**
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	9446 LE DOURIAI PL
	ORLANO 8 FL 32817
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
	Mu Signature STEVEN L. CRAWFURD Printed Name

FILING FEE: \$25.00