

LO9000014598

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED
2014 JAN 29 PM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan JAN 31 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Customized Home 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:

Kari Osnes
(Name of Person)

(Firm/Company)

130 18th Ave NW
(Address)

Naples, FL 34120
(City/State and Zip Code)

For further information concerning this matter, please call:

Kari Osnes at (239) 595-5101
(Name of Person) (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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Customized Home Services, LLC

2. The Articles of Organization were filed on 2-12-2009 and assigned
document number LO9000014598

3. The delayed effective date the dissolution if not effective on the date of 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).

Found full time employment and company
is no longer necessary.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Kari Osnes
130 18th Ave NW
Naples, FL 34120

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Signature

Printed Name

Kari Osnes

Kari Osnes

FILING FEE: \$25.00