

W09000045637

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

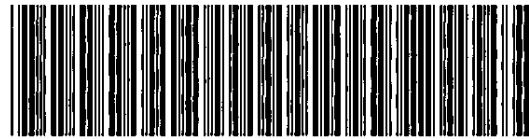
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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09/04/14--01004--019 \*\*25.00

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2014 SEP -4 AM 10:27  
CLERK OF COURT  
HALL COUNTY, FLORIDA

SEP 10 2014  
J. BRUCE

EFFECTIVE DATE 09-11-14

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Special Resource 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:

Joel P. Royal

(Name of Person)

Special Resource Services, LLC

(Firm/Company)

5930 Jaegerglan Drive

(Address)

Lithia, FL 33547

(City/State and Zip Code)

For further information concerning this matter, please call:

Joel P. Royal

(Name of Person)

813

at (

495-3277

(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

RECEIVED  
TALLAHASSEE  
FLORIDA  
STATE  
SECRETARY

2014 SEP -4 AM 10:28

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# ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is  
Special Resource Services, LLC
2. The Articles of Organization were filed on 5-11-09 and assigned  
document number L09000045637
3. The delayed effective date the dissolution if not effective on the date of filing: 9-11-14  
(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).  
Management/Owner is no longer engaged in this type of business.
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: N/A
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:

FILED  
SEP - 4 AM 10:28  
CLERK OF STATE  
TREASURY  
HARRISBURG, PA  
the company's

Signature

Joel P. Royal

Printed Name \_\_\_\_\_

**FILING FEE: \$25.00**

EFFECTIVE DATE 09-11-14