## 109000093639

(Requestor's Name)  (Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL
(Address)  (City/State/Zip/Phone #)
(Address)  (City/State/Zip/Phone #)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PICK-UP WAIT MAIL
(Business Entity Name)
(233,033,030,0
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
111/01/
MNIS

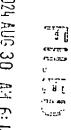
Office Use Only



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08/30/24--01019--016 \*\*25.00





## COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Ralph's Pressure W (Name of Limited	Jesting LLC		
(Name of Limited Liability Company)			
	_		
The enclosed Articles of Dissolution and fee(s) are submitted	<b>1</b> for filing.		
Please return all correspondence concerning this matter to the	e following:		
Sanda Valktond			
Sandra Van Ostrand (Name of Person)			
Ralph's Pressure Weshing LLC (Firm/Company)			
3422 Ace June	ldress)		
h	- 0.0		
Dover FL 335	27		
(City/State	and Zip Code)		
For further information concerning this matter, please call:			
Sandra Van Ostrand (Name of Person)	at (8/3) 763-1139		
(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:	Street Address:		
Registration Section	Registration Section		
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810		
Tallallassee, TE 525 IT	2413 N. Momoe Street, Suite 515		

Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1 1 1 X

1.	The name of a limited liability company is
	- Balph's Pressure Washing LLC
2.	The Articles of Organization were filed on $\frac{9/29/09}{}$ and assigned
	document number <u>L09000093639</u>
	The delayed effective date the dissolution if not effective on the date of filing: 8/27/24 (effective date cannot be prior to or more than 90 days later than date document is received for filing)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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).
	- Ketiring - E
	<u></u>
	- 注: <b>5</b>
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:  Sandra Van Ostrand
	3422 Ace Yn
	Dover FL 33527
6. ab	Signature of an authorized person or if there are no members, the signature of the person appointed and listed ove to wind up the company's activities and affairs:
<u> </u>	Sandra Van Cartan Sandra Van Ostrand
	Signature Printed Name

FILING FEE: \$25.00