

L100000026183

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

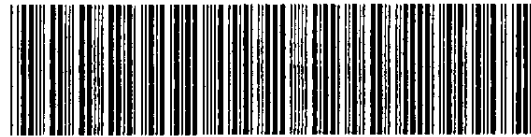
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 FEB 11 PM 1:13

FILED

J. SAULSBERRY  
EXAMINER

FEB 14 2011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NAPLES HANDYMAN 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:

ERVIN KREKA

(Name of Person)

(Firm/Company)

180 FURSE LAKES CIR APT # E12

(Address)

NAPLES, FL 34104

(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ERVIN KREKA

(Name of Person)

at ( 239 ) 273-1761

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ 30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 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**

**FILED**  
2011 FEB 11 PM 4:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is  
**NAPLES HANDYMAN SERVICES LLC.**

2. The Articles of Organization were filed on **03/08/2010** and assigned document number  
**L10000026183**

3. The date the dissolution was approved: **07/20/2010**

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

**THIS LICENSE HAS NEVER BEING USED AND IT HAS BEING OUT OF BUSINESS DUE TO  
A DEATH IN THE FAMILY AND THE FAMILY ECONOMIC HARDSHIP. THE PHONE NUMBER  
THAT WAS ORIGINALLY PROVIDED FOR THIS COMPANY HAS ALSO BEING DISCONNECTED.**

**5. CHECK ONE:**

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.  
-OR-  
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

**7. CHECK ONE:**

- ☒ There are no suits pending against the company in any court.  
-OR-  
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

*Ervin Kreka*

ERVIN KREKA