

L11 0000 41559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

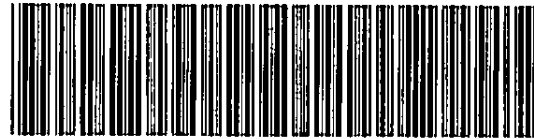
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 MAR 25 AM 8:41

CLERK OF STATE
TALLAHASSEE, FL

C. BRUMBLEY
APR 14 2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All Inclusive Home Services, LLC
(Name of Limited Liability Company)

RECEIVED

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

2022 MAR 25 AM 7:55
DATE
SECRETARY OF STATE
TALLAHASSEE, FL

Kevin F. Jursinski
(Name of Person)

Law Office of Jursinski & Murphy, PLLC
(Firm/Company)

15701 S. Tamiami Trail
(Address)

Fort Myers, FL 33908
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa at (239) 337-1147
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
All Inclusive Home Services LLC

2. The Articles of Organization were filed on 4/7/2011 and assigned
document number L11 0000 41558

3. The delayed effective date the dissolution if not effective on the date of filing: _____
(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).

Business was sold.

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

1116 Carl Ave

Lehigh Acres, FL 33971

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

Eduard Schwarz
Printed Name

FILED
2011 MAR 25 AM 8:41
DEPT. OF STATE
TALLAHASSEE, FL