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TALLAHASSEE, FLORIDA

AUG 09 2018

S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Hines Contracting, 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:

Alexander Hines  
(Name of Person)  
Hines Contracting  
(Firm/Company)  
10470 NW 20 St.  
(Address)  
Pembroke Pines, FL 33026  
(City/State and Zip Code)

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For further information concerning this matter, please call:

Alexander Hines at 305, 450-6588  
(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

1. The name of a limited liability company is

Hines Contracting, LLC

2. The Articles of Organization were filed on 11/4/2011 and assigned

document number L11 000 125 994

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).

I am retiring. There are no employees  
working for me. I have not conducted  
any business operations in over a year.

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

Alexander Hines  
10470 NW 20 St.  
Pembroke Pines, FL 33026

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:

Alex Hines

Signature

Alexander Hines

Printed Name

FILING FEE: \$25.00

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