112000 43061

(Requestor's Name)
(Address)
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(Business Entity Name)
(Document Number)
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I ALBRITTON:

COVER LETTER

TO:

TO: Registration Section Division of Corporations	
SUBJECT:	ited Liability Company)
The enclosed Articles of Dissolution and fee(s) are subm	itted for filing.
Please return all correspondence concerning this matter to	o the following:
- PEqqIE	Maureau ame of Person)
	truction Campony
2265 LEE R	(Address)
Winter Par (City/Si	k FL 32789 alc and Zip Code)
For further information concerning this matter, please call	:
Peggie Maureau (Name of Person)	at (409) 433-0733 (Area Code & Daytime Telephone Number)
·	(Alea 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

ł.	The name of a limited liability company is ISS, LLC	
	ISS, LLC	
2.	The Articles of Organization were filed on $\frac{3/38}{2012}$ and assigned	
	document number <u>L /2 0000 43061</u>	
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 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).		
	INACTIVATED	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's	
•	activities and affairs: PEqq18 Maureau	
	2265 LEE Rd #105A	
	WINTER PARK FL 32789	
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:	
/		
/>	Con Manual Property	
_	Signature Pfinted Name	

FILING FEE: \$25.00