

L12000049553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

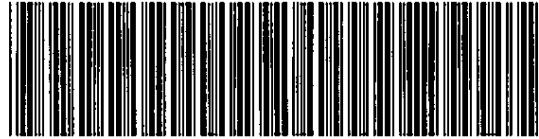
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 JAN 21 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gulligan

JAN 29 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PRO-TEL COMMUNICATION SERVICES, L.L.C.
(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:

ANN HOWCROFT

(Name of Person)

PRO-TEL COMMUNICATION SERVICES, LLC

(Firm/Company)

21653 STIRLING PASS

(Address)

LEESBURG, FL 34748

(City/State and Zip Code)

For further information concerning this matter, please call:

ANN HOWCROFT

(Name of Person)

at (251) 228-0817

(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

FILED

2014 JAN 21 PM 1:54

1. The name of a limited liability company is

PRO-TEL COMMUNICATION SERVICES, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. The Articles of Organization were filed on 4-6-12 and assigned
document number L12000049553

3. The delayed effective date the dissolution if not effective on the date of filing: 12-31-12

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).

OUR CONTRACTS WERE NOT RENEWED WITH OUR
CUSTOMERS.

NO BUSINESS, SO COMPANY CLOSED.

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

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

Printed Name

Ann Howcroft

ANN HOWCROFT

FILING FEE: \$25.00