L12000078324

| (Re | questor's Name) | | |
|---|------------------|-------------|--|
| (Ad | dress) | | |
| (Ad | dress) | | |
| (Cit | y/State/Zip/Phon | e #) | |
| PICK-UP | .WAIT | MAIL. | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies | _ Certificate: | s of Status | |
| Special Instructions to Filing Officer: | | | |
| | | | |
| JAI | N 3 2013 | | |
| S. TONER | | | |
| | | | |

Office Use Only



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12/31/12--01019--018 +425.00



COVER LETTER

TO:

Registration Section Division of Corporations

TEBE 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:

VYTAUTAS VAICIUNAS

(Name of Person)

TEBE SERVICES LLC

(Firm/Company)

14889 SHRIKE WAY

(Address)

FORT MYERS, FL 33908

(City/State and Zip Code)

For further information concerning this matter, please call:

YTAUTAS VAICIUNAS at 239

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

ρ \$25.00 Filing Fee

ρ \$30.00 Filing Fee & Certificate of Status ρ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)

ρ \$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

12 DEC 31 PH 12: 50

SECRETARY OF STATE

| The name of a limited liability company is TEBE SERVICES LLC | TARLET ANY OF STATE |
|--|---|
| 2. The Articles of Organization were filed on L12000078324 | and assigned document number |
| 3. The date the dissolution was approved: 12/28/2012 | 2 |
| 4. A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back cove CLOSING THE BUSINESS | |
| | |
| 5. CHECK ONE: | |
| | ited liability company have been paid or discharged. |
| -OR- Adequate provision has been made for the deb | ots, obligations and liabilities pursuant to s. 608.4421. |
| All remaining property and assets have been distribute rights and interests. | d among its members in accordance with their respective |
| 7. CHECK ONE: | |
| There are no suits pending against the compar- OR- | ny in any court. |
| | isfaction of any judgment, order or decree which may be |
| ignatures of the members having the same percentage of m | embership interests necessary to approve the dissolution |
| Signature | Printed Name |
| Vyfordon Vaiaren | VYTAUTAS VAICIUNAS |
| *************************************** | |
| | |
| | |

FILING FEE: \$25.00