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### **COVER LETTER**

TO: Registration Section Division of Corporations

Name of Limited Liability Company)

(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:

Glenn E	Men Gove
Ritelian home	repetir Services, LLC
2470AVE ES	ddress)
WMENTAVEN, PC	and Zip Code)
For further information concerning this matter, please call:	SECRETA
(Name of Person)	at (803) 69879867 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	Description for Confidence of Dissolution &
\$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
	Kiteuan home repair services, Li
2.	The Articles of Organization were filed on $\frac{212013}{2013}$ and assigned
	document number 1 30000 299:20
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).
	not enough upon to keep company
	going.
	<u> </u>
~	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	2470 PWE ESWO
	winterHaven PESSSSD
	863 20 698 9367 5
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	aller son Glen Aller Gore
	Signature Printed Name

**FILING FEE: \$25.00**