

L170000 71748

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED  
15 APR 30 PM 4:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Emrock Int. LLC dba Ashley's Pool & Irrigation  
(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:

Robin Kramer

(Name of Person)

Emrock Int LLC

(Firm/Company)

2893 North Harbor City Boulevard

(Address)

Melbourne, FL 32935

(City/State and Zip Code)

For further information concerning this matter, please call:

John Stives  
(Name of Person)

at (321) 259-8607  
(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

FILING CANCELLED  
RETURNED CHECK

1. The name of a limited liability company is

Emrock International LLC dba Ashley's Pool & Irrigation

2. The Articles of Organization were filed on 13-May-2013 and assigned

document number L 13000071348

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)

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).

Reposessed by previous owner

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

John Stivers PRBI  
2893 N. Harbor City Blvd  
Melbourne, FL 32935

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

R. Kramer

Printed Name

FILING FEE: \$25.00