213000092567

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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M. MILLIGAN EXAMINER

AUG 28 2014

COVER LETTER

Division of Corporations	 			
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SUBJECT: SUEDELAGES (LEANING: DERVICES-LLS (Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

TO:

Registration Section

Please return all correspondence concerning this matter to the following:

CARLOS SUTIERREZ
(Name of Person)

EVERGLACIES (LEANING, SCAVICES) L.C
(Firm/Company)

1325 S.W. INGRASSINA, AV.
(Address)

PORT CAINT (UCIE . Fl. 34953

For further information concerning this matter, please call:

PARIOS GUTTENPT at (772)2246862 (Name of Person) (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/COURTER ADDRESS: Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED

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DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SFAVILES

AH. MICHEILE

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1:	The name of a limited liability company is EURGIAGES CLEANING Service 5 LL.C.
2.	The Articles of Organization were filed on June -27-2013 and assigned
	document number 1.13000092567
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).
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5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
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6, lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
<u>, </u>	CARLOS GUTIERREZ Signature Printed Name

FILING FEE: \$25.00

14 AUG 28 AH II: 09
SECRETARY OF STATE
ALLAMASSER, FIGURES