

U13 000 120730

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

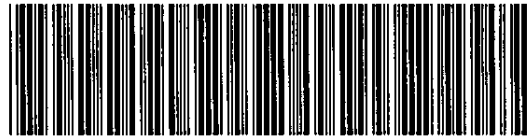
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2014 MAR 21 PM 12:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 24 2014

T CLINE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SENTRA Clean 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:

Charlotte Gutierrez.
(Name of Person)

SENTRA Clean.
(Firm/Company)

6249 SOUTH BEND SQ.
(Address)

ORLANDO, FL 32807
(City/State and Zip Code)

For further information concerning this matter, please call:

Charlotte Gutierrez at (407) 731-4576.
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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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**

1. The name of a limited liability company is

Sentra Clean LLC.

2. The Articles of Organization were filed on 8/26/2013 and assigned

document number L13000120730

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).

Relocating out of state / not enough
Client Base.

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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TALLAHASSEE, FLORIDA

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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

Charlotte Gutierrez
Printed Name

FILING FEE: \$25.00