

L13000 15729

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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RECEIVED
15 APR 30 PM 3:52
DIVISION OF CORPORATION

FILED
15 APR 30 PM 3:46
TOMMY L. J. JAMES
J. J. JAMES

EFFECTIVE DATE
4/30

APR 30 2015
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Higher Level Cleaning Service 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:

Shirley Howard
(Name of Person)

Higher Level Cleaning Service
(Firm/Company)

1649 Oak Ridge Rd
(Address)

Tallahassee, FL 32305
(City/State and Zip Code)

For further information concerning this matter, please call:

Shirley Howard at (850) 566-7389
(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/COURIER ADDRESS:

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

FILED
15 APR 30 PM 3:46
TALLAHASSEE, FL
DIVISION OF CORPORATIONS

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is

Shirley Higher Level Cleaning Service

2. The Articles of Organization were filed on 11/8/2013 and assigned

document number L13000157299

3. The delayed effective date the dissolution if not effective on the date of filing: 4/30/2015
(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).

Not intended to keep business

Not enough income. Very low business

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

Shirley Howard
P.O. Box 5494
Tallah, FL 32314

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:

Shirley Howard
Signature

Shirley Howard
Printed Name

FILING FEE: \$25.00

FILED
15 APR 30 PM 3:46
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA