

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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10/26/15--01047--017 **55.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: F.P.C Services 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:
Michael Glass (Name of Person)
FP.C Services LLC (Firm/Company)
2498 Pepper Dr (Address)
Navarre, FL 32566 (City/State and Zip Code)
For further information concerning this matter, please call:
Michael Glass at 850 353 - 6437 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Terson) (Area code at Daytine Telephone (Name)
Enclosed is a check for the following amount: \$\Begin{align*} \$25.00 \text{ Filing Fee} and Certificate of Dissolution \text{ Certified Copy (additional copy is enclosed)} \text{ Certified Copy (additional copy is enclosed)}
MAILING ADDRESS. CTDEET/COUDIED ADDRESS.

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 F.P.C. Services
2.	The Articles of Organization were filed on $12 - 18 - 2013$ and assigned
	document number <u>L13660174620</u>
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).
	No longer in business
	SECRE LLAH
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	2498 Pepper Dr
	Navarre, FL 32566
6.	Signature of an authorized person or if there are no members, the signature of the person appointed and stell above to wind up the company's activities and affairs:
	MI-1 0 mg
	Signature Michael Glass Printed Name

FILING FEE: \$25.00