L14000016198

| (Re | equestor's Name) | | | |
|---|--------------------|-----------|--|--|
| (Ad | ldress) | | | |
| (Ad | ldress) | | | |
| (Cit | ty/State/Zip/Phone | #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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**25.00

2015 MAR 12 AN 10: 46

COVER LETTER

Division of Corporations Professional Mobile Marine Service, LLC SUBJECT: (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: Jose Herodier (Name of Person) (Firm/Company) 2061 Fawn Meadow Circle (Address) St. Cloud, FI 34772 (City/State and Zip Code) For further information concerning this matter, please call: Jose Herodier 362-0264 (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:

TO:

Registration Section

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 3, 2015

JOSE HERODIER 2061 FAWN MEADOW CIRCLE ST. CLOUD, FL 34772

SUBJECT: PROFESSIONAL MOBILE MARINE SERVICE, LLC

Ref. Number: L14000016198

SUREAU OF COMMERCIAL INFORMATION SERVICES

OBILE MARINE

We have received your document for PROFESSIONAL MOBILE MARINE SERVICE, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 415A00004380

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED 2015 MAR 12 AM 10: 46

| The name of a limited I Professional Mobile | liability company is e Marine Service, LLC | | SECRETARY OF STATE TALLAHASSLE, FLORID |
|--|---|--|--|
| 2. The Articles of Organiz | zation were filed on Januar | ry 29, 2014 | and assigned |
| document number L14 | 000016198 | | |
| 3. The delayed effective of the delayed effect | date the dissolution if not efficient date cannot be prior to or mo | ective on the date of fore than 90 days later than | iling. date document is received for filing) |
| 4. A description of occurr 605.0707, Florida Statu | ence that resulted in the limites, (copy 605.0707 on back | ited liability company cover letter). | 's dissolution pursuant to section |
| Entity never conduc | , , , , , | , | |
| 5. If there are no member activities and affairs: | s, enter the name and address | s of the person appoin | ted to wind up the company's |
| | 2061 Fawn Meado | ow Circle | |
| | St. Cloud, FI 3477 | 2 | |
| 6. Signature of an authori | zed person or if there are no e company's activities and a | members, the signatu ffairs: Jose Herodier | re of the person appointed and |
| Signatu | ire d | | nted Name |

FILING FEE: \$25.00