

L14000092819

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2015 APR 27 PM 4:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Cuffigan MAY - 4 2015

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DSH CUSTOM IT CONSULTING 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:

DOUGLAS G. HUSER  
(Name of Person)

DSH CUSTOM IT CONSULTING LLC  
(Firm/Company)

17513 EDINBURGH DR  
(Address)

TAMPA FL 33647  
(City/State and Zip Code)

For further information concerning this matter, please call:

DOUGLAS G. HUSER at (913) 530-8933  
(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

ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY

FILED

2015 APR 27 PM 4:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

DSH CUSTOM IT CONSULTING LLC

2. The Articles of Organization were filed on 6/10/2014 and assigned

document number L14000092819

3. The delayed effective date the dissolution if not effective on the date of filing: IMMEDIATELY  
(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).

WE NEVER STARTED DOING BUSINESS UNDER  
THIS LLC.

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

DOUGLAS HUSER

17513 EDINBURGH DR

TAMPA FL 33647

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

DOUGLAS O. HUSER  
Printed Name

FILING FEE: \$25.00