*L14000115686

(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
(Cir	ty/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
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K.SALY EXAMINER MAY -5 2015

COVER LETTER

SUBJECT: Precision Masters Lawn Care & Design (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:
Miltena Rembert (Name of Person)
Precision Masters Lawn Care & Design
2564 Willow Creek Drive
Fleminy Island FL 32003 (City/State and Zip Code)
For further information concerning this matter, please call: Miltena Rembert at (904) 541-0324 (Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

TO:

Registration Section Division of Corporations

\$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

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ARTICLES OF DISSOLUTION
A LIMITED LIABILITY COMPANY
ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY 1. The name of a limited liability company is PICCISION Master Lawn Carl & Dissigan Of State Of Sta
2. The Articles of Organization were filed on $\frac{7/23}{2014}$ and assigned
document number # <u>L14000115686</u>
3. The delayed effective date the dissolution if not effective on the date of 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). Financial Loss and ankit perionce in the lawn care business. I do not have the
So, I want to dissolve to limit furthe losses
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: Miltena Rembert
2564 Willow Creek Drive
Fleming Island FL 32003
(NO other members)
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:
Welters Kembert Miltena Rembert Printed Name
FILING FEE: \$25.00