

L14000 143361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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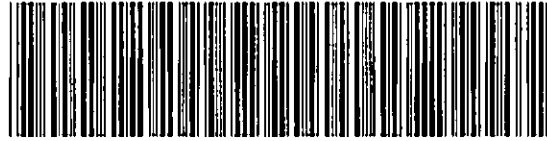
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Diversified Services and Demolition 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:

Hans Schmitz
(Name of Person)

(Firm/Company)

11906 NW 274th Place
(Address)

Alachua, FL 32615
(City/State and Zip Code)

For further information concerning this matter, please call:

Marie House at (352) 346-0069
(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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FL

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

20 JAN -9 PM 1:36
FILING

1. The name of a limited liability company is

Diversified Services and Demolition LLC

2. The Articles of Organization were filed on September 15, 2014 and assigned

document number L14000143361

3. The delayed effective date the dissolution if not effective on the date of filing: Jan 15, 2010
(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).

Offered a job with benefits

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

6. Signature of an authorized person or if there are no members, the signature of the person appointed and list above to wind up the company's activities and affairs:

Hans Schmutz
Signature

Hans Schmutz
Printed Name

FILING FEE: \$25.00