

L14000164236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/26/16--01020--027 **25.00

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SECRETARY OF FLORIDA
TALLAHASSEE
16 APR 26 PM 3:35

APR 27 2016

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLASS HOMECARE 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:

Lawrence M. Schneider

(Name of Person)

Class Homecare LLC

(Firm/Company)

9781 Arbor Oaks Lane, Unit #108

(Address)

Boca Raton, FL 33428

(City/State and Zip Code)

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SECRETARY OF FLORIDA
TALLAHASSEE, FL
16 APR 26 PM 3:35

For further information concerning this matter, please call:

Lawrence M. Schneider

(Name of Person)

561-859-1433

at (

) (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)

NOT
SENT

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

CLASS HOMECARE LLC

2. The Articles of Organization were filed on 10/21/2014 and assigned

document number L14000164236

3. The delayed effective date the dissolution is not effective on the date of filing: 01/01/2015

(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).

The company never actually open and never started to do business. There was absolutely no business transacted

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

Lawrence M. Schneider

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:

 member
Signature

Lawrence M. Schneider, member
Printed Name

FILING FEE: \$25.00

FILED
STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FL 32301
16 APR 26 PM 3:35

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company: **CLASS HOMECARE LLC**

Document number of Limited Liability Company is: **L14000164236**

Date of dissolution was: **01/10/2015**

Description of information that must be included in a written claim:

No business was ever transacted.

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SECRETARY OF FLORIDA
TALLAHASSEE, FL 32301
10 APR 26 PM 3:35

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

Class Homecare LLC

9781 Arbor Oaks Lane, Unit #108

Boca Raton, FL 33428

A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Lawrence M. Schneider

Printed Name of the Person Filing

Lawrence M. Schneider member
Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00