L15000003083

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

900284362459

04/21/16--01008--020 **25.00

FILED
2016 APR 21 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER
APR 22

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Soares Integrated Services
(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:

Michael C Soares
(Name of Person)

Soares Integrated Services
(Firm/Company)

2592 Sherwood dr.
(Address)

Navarre FL. 32566
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael Soares at (850) 240-5282
(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
2016 APR 21 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
Soares Integrated Services

2. The Articles of Organization were filed on 1/7/15 and assigned

document number L15000003083

3. The delayed effective date the dissolution if not effective on the date of filing: 4-26-2016
(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 that Soares Integrated Services was subcontracting and Consulting to decided to no longer contract with Soares Integrated Services. With no other clients, there is no further need to keep bosiness open.

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

Michael Soares
2592 Sherwood dr.
Navarre FL. 32566

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:

Michael Soares
Signature

Michael Soares
Printed Name

FILING FEE: $25.00