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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: G&J Home Repairs, LLC (Name of Limited Liability Company)							
(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:							
Tustin Fife							
(Name of Person)							
A \ \ \							
(Firm/Company)							
27/ 5 1 July - N							
226 S. Waterway Dr. (Address)							
Port Charlotte, FL 33952 (City/State and Zip Code)							
(Chiyi Salid Lila Ling Could)							
For further information concerning this matter, please call:							
(Name of Person) at (941) 626-8382 (Area Code & Daytime Telephone Number)							
(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 DH 12: 17

1.	The name of a limited liability	company is			2015 AUG 21	TH IC	
	G\$I	Home R	epairs, LC			PROPIDA	
2.	The Articles of Organization w	ere filed on	January Os	3, 2015	and assigned		
	document number <u>L</u> 15	00000392	20				
3.	The delayed effective date the defective date Note: If the date inserted in this listed as the document's effective	block does not r	neet the applicable stat	utory filing re	ocument is received equirements, this de	for filing) ate will not be	
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to sec 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).							
			, Charles		<u>.</u>		
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5.	If there are no members, enter t activities and affairs:	he name and ε	address of the person	appointed to	o wind up the co	mpany's	
	_	Jus	tin Fife				
		226	S. Woternay	Dr.			
		Port	Charlotte, FI	_3395;	2		
6. lis	Signature of an authorized pers sted above to wind up the compa	on or if there a ny's activities	are no members, the sand affairs:	signature of	the person appoi	inted and	
	Just 12 TA Signature	<i>y</i>		Justin Printed	File Name		

FILING FEE: \$25.00