## U50007/518

(Re	questor's Name)	
S		
	dress)	·- <u>-</u>
•		
(Address)		
(Cit	ty/State/Zip/Phone	∍#)
PICK-UP	☐ WAIT	MAIL
(Ві	siness Entity Nar	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
	<b></b> :	

Office Use Only



400276881064

09/22/15--01010--003 \*\*25.00

FILLED

15 SEP 22 PH I: 40

SEGRETARY OF STATE

SEP 23 2015 S. YOUNG

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: OXFORD INterNational Cleaning Services 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:		
Neil Collins (Name of Person)		
OXFORD International Cleaning Services LLC (Firm/Company)		
8725 FORREST HILLS BIUD IN SEE SE		
Coral Springs FL 33065		
For further information concerning this matter, please call:		
(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  STREET/COURIER ADDRESS: Registration Section		
Division of Corporations Division of Corporations		
P.O. Box 6327 Clifton Building		

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is
OXFORD INTernational Cleaning Services LLC.
2. The Articles of Organization were filed on $04/28/2015$ and assigned
document number <u>L15000074598</u>
3. The delayed effective date the dissolution if not effective on the date of filing: 08/15/2015  (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).  We Were not getting enough Business and
We had to pay overhead costs that was
not been generated by the Company.
5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
Mag a Co
TATE 15
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:
Signature ONETL COLLINS Printed Name
NUMBURA : Printed Name

**FILING FEE: \$25.00**