L15000097762

(Re	questor's Name)	
(Ad	ldress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
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(Do	ocument Number)	·
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2015 AUG 27 PH 4: 39
SECNETARY OF STATE
AND SEFF FLORIDA

NIG 3 1 2015 J. HARRIE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HEIN SErVICE Professionals L
(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:
KENNETH HOLLEY (Name of Person)
(Firm/Company)
1035 SE 159 CT (Address)
Silver Springs Fix 34488 (City/State and Zip Code)
For further information concerning this matter, please call:
KERINET IT HOLLEY at 352 843 4006 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee and Certificate of Dissolution S55.00 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

1.	The name of a limited liability company is H = W Service Profession Als LLC:		
2.	The Articles of Organization were filed onand assigned		
	document number <u>L1500009776</u>		
3.	The delayed effective date the dissolution if not effective on the date of filing: (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.		
 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). 			
	No BUSINESS TABLE 27 PH		
5.	If there are no members, enter the name and address of the person appointed to wind up the company activities and affairs:		
	KENNETH HOLLEY		
	1035 SE 159 CT Silver Springs Fl 34488		
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:		
	Lenneth Holley Printed Name		
FILING FEE: \$25.00			