

L15 000 123776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

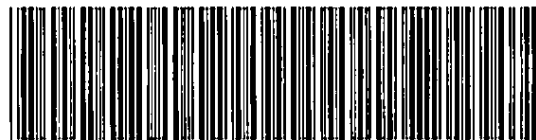
(Document Number)

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APR 26 2021

2022 APR 26 PM 5:29

O SIMMONS

JUN 09 2021

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Suited Hands 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:

Jessica Caceres

(Name of Person)

Suited Hands

(Firm/Company)

1379 MCANSTH SQ

(Address)

Sarasota, FL 34236

(City/State and Zip Code)

For further information concerning this matter, please call:

Jessica Caceres

(Name of Person)

at ( 941 ) 258 8462

(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Suited Hands, LLC

2022 APR 26 PM 5:29

2. The Articles of Organization were filed on 7/20/2015 and assigned

document number

L15 000 123 776

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.

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).

Business contract was not renewed at  
location of operation due to lack of  
demand & difficulty in hiring  
due to COVID19

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

Jessica Caceres

3524 67 ter E

Sarasota, FL 34243

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:

Jessica Caceres  
Signature

Jessica Caceres  
Printed Name

**FILING FEE: \$25.00**