U5000 150 684

| (Re | questor's Name |) |
|-------------------------|-------------------|--------------|
| . (Ad | dress) | |
| (Ad | dress) | , |
| | | |
| (Cit | y/State/Zip/Phor | ne #) |
| PICK-UP | WAIT | MAIL |
| (Ru | siness Entity Na | ime) |
| · | onicoo Entity (ve | |
| (Do | cument Number | r) |
| Certified Copies | _ Certificate | es of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | • |
| | | |
| | | į |

Office Use Only



500298220415

04/27/17--01002--017 **25.00

APR 2 8 2017 S. YOUNG SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Lufkin 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:

Jon Fraze, CPA

(Name of Person)

Loden, Fraze & Associates, P.A.

(Firm/Company)

4601 Central Ave

(Address)

St Petersburg, FL 33713

(City/State and Zip Code)

SECRETARSSEE, FLORIDA
TALLA APR 27 PH 2: 44

For further information concerning this matter, please call:

Jon Fraze, CPA

 $_{\rm at}$ /2/

190-7336

(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

TORIVED AR 10:46

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY, COMPANY

| 1. | The name of a limited liabil LUFKIN SERVICES, LLC | ity company is | | |
|--|---|--|--|--|
| 2. | The Articles of Organization | n were filed on SEPTEMBER 2, 2015 and assigned | | |
| | document number L1500015 | 50686 | | |
| 3. | Note: If the date inserted in t | the dissolution if not effective on the date of filing: 12/31/2016 date cannot be prior to or more than 90 days later than date document is received for filing) this block does not meet the applicable statutory filing requirements, this date will not be ctive date on the Department of State's records. | | |
| 4. | A description of occurrence 605.0707, Florida Statutes, (| that resulted in the limited liability company's dissolution pursuant to section copy 605.0707 on back cover letter). | | |
| | NO LONGER AN ONGOING | DUCINECC ENTITY | | |
| | | BUSINESS ENTITY | | |
| | | | | |
| | | PH 2: 44 | | |
| 5 | If there are no members out | | | |
| 5. If there are no members, enter the name and address of the person appointed to wind up the comparativities and affairs: LOIDA S LUFKIN | | | | |
| | | 648 APALACHEE CIRCLE NE | | |
| | | ST PETERSBURG, FL 33702 | | |
| | | | | |
| 6. lis | Signature of an authorized pated above to wind up the con | person or if there are no members, the signature of the person appointed and npany's activities and affairs: | | |
| _ | lada J. Sayli. | LOIDA S LUFKIN | | |
| | Signature | Printed Name | | |

FILING FEE: \$25.00