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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	#)
PICK-UP		MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	<u> </u>	



07/17/17--01020--019 ++25.00



Office Use Only

COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: _	ALL	F.	Service	LLC.	
			(Name of Limited Liability	Company)	

The enclosed Articles of Dissolution and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Frank Batista (Name of Person) FGervice. LLC 8510 SW 150 Ave Apt 106 Miami, FL. 33196 (City/State and Zip Code)

For further information concerning this matter, please call:

at (786) 370 3167 (Area Code & Daytime Telephone Number) Frank Bait Ta

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Enclosed is a check for the following amount:

Dissolution \$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

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1.	The name of a limited liability company is
	ALL F Service LLL
2.	The Articles of Organization were filed on $10 - 20 - 2017$ and assigned
	document numberL15000178495
3.	The delayed effective date the dissolution if not effective on the date of filing: $10-20-2015$ (effective date cannot be prior to or more than 90 days later than date document is received for filing) <u>Note:</u> 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).
	<u>I not make money.</u>
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: Frank Batista
	ALL F Service LLC
	851054 150 Ave Apt 106
	Miami, FL. 33196.

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:

Frank ignature

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Fizank Batista, Printed Name

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FILING FEE: \$25.00