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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A L L RESIDENTIAL AND COMMERCIAL 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:

GABRIELA AGUILAN			
(Name of Person)			
·			
A & L RESIDENTIAL AND COMMORCIAL CLEANING S	erui ci	58, L	LC
(Firm/Company)			
6721 JOHNSON ST. AAT. #103 (Address)	71/1. 33S		
.(Address)	五溢。	>>	
	55-5	20	\Box
Horry Wood, FL 33054 (City/State and Zip Code)	22.5°	12	ī
(City/State and Zip Code)	Fig.		П
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For further information concerning this matter, please call:		03	
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GABRIELA AGUILAR at (954) 520-3507	<u> </u>		
(Name of Person) (Area Code & Daytime Telephone N	umber)		
Enclosed is a check for the following amount:			

MAILING ADDRESS:

\$25.00 Filing Fee and Certificate of Dissolution

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

☐ \$55.00 Filing Fee, Certificate of Dissolution &

Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is	
	A KL RESIDENTIAL AND COMMERCIAL CLEANING SERVICES, LLC.	
2.	The Articles of Organization were filed on $\frac{2/8}{206}$ and assigned	
	document number <u>L/60000 367 97</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing: 4/7/2016 (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 b listed as the document's effective date on the Department of State's records.	e
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).	
	UNABLE TO FULL FILL EXPECTATIONS FOR FULL CAPACITY FUNCTIONING OF THE	E COMPANY
	·	
	SE TO	
5.	If there are no members, enter the name and address of the person appointed to wind up the company	Π
	activities and affairs: GADRIELA AGUILAR STORM	
	6721 - DOHNSON ST. Apr. 103 70 2	
	HOLYWOOD FL 330 St 20 3	
	· · · · · · · · · · · · · · · · · · ·	
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:	
•	* Com Cabrielo AGUILOI.	
	Signature Printed Name	

FILING FEE: \$25.00