46000035702

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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02/27/17--01011--004 **25.00

S. YOUNG

SECRETARY OF STATE TALL AHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 28, 2017

STEVE TAYLOR 52 TUSCAN WAY #202 ST AUGUSTINE, FL 32092

SUBJECT: NTEGRITY SERVICES LLC

Ref. Number: L16000035702

We have received your document for NTEGRITY SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A description of the occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707(1)(c), Florida Statutes, must be contained in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 317A00003825

SECRETARY OF STATE
TALEAHASSEE, FLORIDA
TALEAHASSEE, FLORIDA
TALEAHASSEE, FLORIDA

2017 APR 27 AM 10

COVER LETTER

Division of Corporations	
SUBJECT: NTEGRITI SERVICES LLC (Name of Limited Liability Company)	
(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:	
STEVE TAYLOR (Name of Person)	
(Name of Person)	
(Firm/Company)	24
52 TUSCAN WAY # 202	(€ 155 5#
(Address)	л. Д-4
ST AUGUSTINE FL 32092 2 5	25
(City/State and Zip Code)	بريد اين 2
ST AUGUSTINE FL 32092 (City/State and Zip Code) For further information concerning this matter, please call:	
$oldsymbol{\omega}$	~
at ()(Name of Person) at () (Area Code & Daytime Telephone Number)	
(
Enclosed is a check for the following amount:	
\$25.00 Filing Fee and Certificate of Dissolution \$\Bigsize \\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section

TO:

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 lia	
NTEGRITY	SERVICES LLC
2. The Articles of Organizat	tion were filed on 02/10/16 and assigned
document number <u>L</u> 1	6000035702
effect) Note: If the date inserted i	te the dissolution if not effective on the date of filing: ive date cannot be prior to or more than 90 days later than date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will not be fective date on the Department of State's records.
4. A description of occurren 605.0707, Florida Statutes	nce that resulted in the limited liability company's dissolution pursuant to section s, (copy 605.0707 on back cover letter).
- John State of the State of th	NO LONGER MEEDED
	TES TES
5. If there are no members,	enter the name and address of the person appointed to wind up the company's
activities and affairs:	LEGAL INC CORPORATE SERVICES INC
	5237 SUMMERLIN COMMONS
	SUITE 400
	FORT MYERS. FL 33907
6. Signature of an authorize listed above to wind up the c	
6. Signature of an authorize listed above to wind up the contact of the contact o	FORT MYERS. FL 33907 d person or if there are no members, the signature of the person appointed and

FILING FEE: \$25.00