

L160000 43505

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

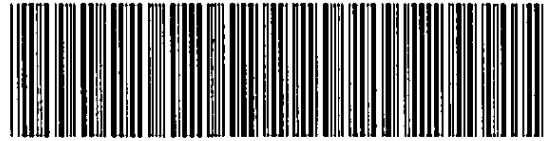
(Business Entity Name)

(Document Number)

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MAY 27 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: FACILITIES SERVICE & EQUIPMENT PROVIDERS, 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:

HOPETON KENTON  
(Name of Person)

FACILITIES SERVICE & EQUIPMENT PROVIDERS, LLC  
(Firm/Company)

3953C SAN ANSELMO DRIVE  
(Address)

LAKE WORTH BEACH, FL 33467  
(City/State and Zip Code)

For further information concerning this matter, please call:

HOPETON KENTON at ( 561 ) 635 3197  
(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 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

FACILITIES SERVICE & EQUIPMENT PROVIDERS, LLC

2. The Articles of Organization were filed on 4/15/2020 and assigned

document number 920A 00008776

3. The delayed effective date the dissolution if not effective on the date of filing: 5/31/2020  
(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.

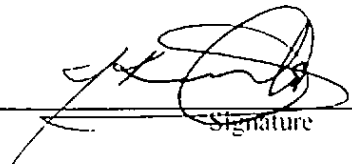
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

LIMITED LIABILITY COMPANY INACTIVE.

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

HOPETON KENTON  
3953 C SAN ANGELO DRIVE  
LAKE WORTH BEACH FL 33467

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:

  
Signature

HOPETON KENTON  
Printed Name

FILING FEE: \$25.00

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HALL COUNTY CLERK  
TALLAHASSEE, FLORIDA