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SEGRETARY OF STATE ALLAHASSEE, FLORIDA

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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Ysbrand Painting 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:

Keith Allen Ysbrand

(Name of Person)

Ysbrand Painting LLC

(Firm/Company)

1501 Walnut St

(Address)

Green Cove Springs, FL 32043

(City/State and Zip Code)

For further information concerning this matter, please call:

Keith Ysbrand

(Name of Person)

at 904 , 805-5893

Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution

S55.00 Filing Fee, Certificate of Dissortion & Certified Copy (additional copy is energised)

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

1.	The name of a limited liability company is						
	Ysbrand Painting LLC		<u> </u>		·		
2.	The Articles of Organization	n were filed on		and assigned			
	document number L1600014	7514					
3.	The delayed effective date the dissolution if not effective on the date of filing: (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).						
	I am no longer operating this business nor will be in the future due to lack of business opportunities						
	I am now pursuing a different c	areer path and no longer choo	ose to be self employe	d in the future.			
5.	If there are no members, ent activities and affairs:	er the name and address of Keith Allen Ysbrand	the person appointe	ed to wind up the com	pany's		
	activities and arians.			SECRETARY OF STALLAHASSEE. FL	7018 NOV -1 P		
6. lis	Signature of an authorized p ted above to wind up the con	person or if there are no me appany's activities and affai	mbers, the signature rs:	of the person appoint	ted and		
1	hit Mil	wowa	Keith	Ysbranc			
	Signature		Prin	ted Name			

FILING FEE: \$25.00