## 1/600156178

(Red	questor's Name)	
(Add	dress)	· <del>-</del>
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900302867039

08/24/17--01007--009 \*\*25.00



S. WARREN AUG 2 5 2017

### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

### CAC CLEANING SERVICE 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:

# Julia Lugo (Name of Person) CAC CLEANING SERVICE LLC (Firm/Company) 13300 Atlantic Blvd Apt # 1709 (Address) Jacksonville, FL 32225

(City/State and Zip Code)

For further information concerning this matter, please call:

Julia Lugo

(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

☐ \$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

1.	The name of a limited liability company is  CAC CLEANING SERVICE LLC
2.	The Articles of Organization were filed on and assigned and assigned
	document number L16000156178
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).  Voluntary Dissolution by Member
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
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:
_	Julia Logo
_	Signature Printed Name  FILING FEE: \$25.00

17 AUG 24 PH 1: 19

ALL LIFE SEE TORIDA