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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

	ration Section on of Corporations			
SUBJECT: _		n Equipment Rental, LLC.		
	(Name of Limit	red Liability Company)		
	rticles of Dissolution and fee(s) are submit			
	Michelle T. Van Ke	eulen ne of Person)		
Tool Chest Construction, LLC. (Firm/Company)				
	346 19th Ave			
		Address)		
	Vero Beach, FL. 329 (City/Sta	962 te and Zip Code)		
For further infor	mation concerning this matter, please call;			
	Michelle T. Van Keulen (Name of Person)	at (772) 532-5828 (Area Code & Daytime Telephone Number)		
Enclosed is a chec	ck for the following amount:	. ,		
X \$25.00 l	Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)		
	MAILING ADDRESS:	STREET/COURIER ADDRESS:		
	Registration Section Division of Corporations P.O. Box 6327	Registration Section Division of Corporations		
	r.O. D0x 0327	Clifton Building		

2661 Executive Center Circle

Tallahassee. FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liability company is	
Townsend Construction Equip	oment Rental, LLC.
2. The Articles of Organization were filed on	/31/2017 and assigned
document number <u>L17000024805</u>	
3. The delayed effective date the dissolution if not effective date cannot be prior to or mo Note: If the date inserted in this block does not meet the listed as the document's effective date on the Department	ore than 90 days later than date document is received for filing) applicable statutory filing requirements, this date will not be
4. A description of occurrence that resulted in the limit 605.0707, Florida Statutes, (copy 605.0707 on back	cover letter).
Busness Partner JUSEP	H TOWNSEND WAS DOING
PROTECT MY LICENSE AND I	
5. If there are no members, enter the name and address	of the person appointed to wind up The company's
	Van Keulen E E T
346 19 m	Ave
Vero Bene	4, Fc. 32962 SO
5. Signature of an authorized person or if there are no risted above to wind up the company's activities and af	nembers, the signature of the person appointed and fairs:
Michell War Kurl Signature	Michelle Wan Keulen Printed Name

FILING FEE: \$25.00