

L17000080935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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200303398712

09/18/17--01008--017 **25.00

FILED
2017 SEP 18 PM 3:07
CLERK OF COURT
CLERK OF COURT

K SALY
SEP 19 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hole in one Renovation, 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:

Alexander Santelises

(Name of Person)

(Firm/Company)

12021 Villanova Drive suite 112

(Address)

Orlando Florida, 32837

(City/State and Zip Code)

For further information concerning this matter, please call:

Alexander A Santelises at (407) 832-7495

(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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

FILED
2017 SEP 18 PM 3:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is
HOLE IN ONE RENOVATION, LLC

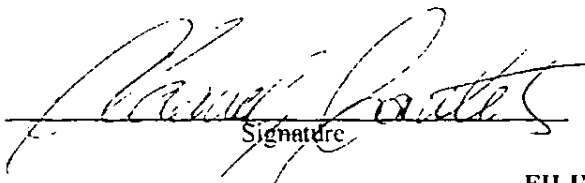
2. The Articles of Organization were filed on 04/11/2017 and assigned
document number L17000080935

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).
LLC WAS NEVER PUT TO USE NO NEED FOR IT. RELOCATING OUT OF STATE

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

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

ALEXANDER A SANTELISES
Printed Name

FILING FEE: \$25.00