L170000 91859

(Re	questor's Name)	· · · · · ·
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PINNACLE HEATING + AIN (C)
(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:

MAX ALLEN ROBERTS
(Name of Person)

PINNACLE HEATING + AIN LC.C.
(Firm/Company)

11405 BRIGHT STAR CIT
(Address)

TALLAHASSEE FL 32305
(City/State and Zip Code)

For further information concerning this matter, please call:

MAX ALLEH ROBERTS at (SSO) 322-7874

(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

1.	The name of a limited liability company is
	PINNACLE CORSTAL HEATING + AIR LLC
2.	The Articles of Organization were filed on $4-25-2017$ and assigned
	document number <u>17000091859</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: 8-2/-/2 (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).
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	· · · · · · · · · · · · · · · · · · ·
5	activities and affairs: MHX ALCEN ROBERTS
	activities and affairs: //// / //// ////////////////////////
	11405 BILIGHT STAR CIT SEE
	TAMAHNSIE FL 32305 500 =
6	5. Signature of an authorized person or if there are no members, the signature of the person appointed and isted above to wind up the company's activities and affairs:
/	m. 111 M. 1
<u></u>	May Alle The MAX ALLEN ROBERTS Printed Name

FILING FEE: \$25.00