L17000110170

| (Requestor's Name) | | | | | |
|-----------------------------------------|--|--|--|--|--|
| (Address) | | | | | |
| (Address) | | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP WAIT MAIL | | | | | |
| (Business Entity Name) | | | | | |
| (Document Number) | | | | | |
| | | | | | |
| Certified Copies Certificates of Status | | | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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บร/20/19--01025--023 **25.00





COVER LETTER

| TO: Registration Section Division of Corporations | |
|-------------------------------------------------------------|----------------------------------------------------|
| SUBJECT: Elite Contracting Services | s of NWFLLC |
| (Name of Limit | ted Liability Company) |
| | |
| The enclosed Articles of Dissolution and fee(s) are submit | tted for filing. |
| Please return all correspondence concerning this matter to | the following: |
| Claiplan | A so close cons |
| SNIKIEG S | ANGERSON me of Person) |
| | |
| Elite Contracting Ser | vices of NWFLLC |
| (Fir | rm/Company) |
| 223 N. Gregory | Street |
| | (Address) |
| Pansacola, FL 372 | 2502 ate and Zip Code) |
| (City/\$1 | ate and Zip Code) |
| For further information concerning this matter, please call | : |
| Shirley Anderson | at (850) 76-6725 |
| (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 & |

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

Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION |FOR A LIMITED LIABILITY COMPANY

| 1. | The name of a limited liability EITE CONTROLLING | company is SEXVICES 0 | F NWF,LLC | | 20 |
|-----------|---------------------------------------------------------------------------------------------------------------------|-------------------------------------------|------------------------------------------------|-----------------------------|-------------------------|
| 2. | The Articles of Organization w | vere filed on | 1/03/2017 | and assigned | 1 6 |
| | document number <u>L17000</u> | 0110170 | | | المام المام المام |
| 3. | The delayed effective date the (effective dat Note: If the date inserted in this listed as the document's effective | e cannot be prior to block does not me | or more than 90 days later the | in date document is recei | ved for filing) |
| 4. | A description of occurrence th 605.0707, Florida Statutes, (co | at resulted in the py 605.0707 on b | limited liability compar ack cover letter). | ny's dissolution purs | uant to section |
| | Dissolving compa | any due | lo owners | health co | nems/ |
| | issues, unable | to conti | hue with co | anpany at | + this |
| | time. | | | | |
| | | | | | |
| 5. | If there are no members, enter activities and affairs: | | dress of the person appo | | company's |
| | _ | 129 | t p7 Wilsey Li | า | |
| | _ | Lill | ian, AL 3i | <i>i</i> 549 | |
| | | | | | |
| 6. lis | Signature of an authorized persted above to wind up the compa | son or if there are any's activities a | no members, the signa d affairs: | ture of the person ap | pointed and |
| 2 | MU AUURSOW Signature | | Shirley | S. ANGUESON Printed Name | |

FILING FEE: \$25.00

As of 05/15/2019 please mail any corresponding letters to the following:

Shirley Anderson
Elite Contracting Services of NWF, LLC
12557 Wilsey Lane
Lillian, AL 36549

850-776-6725