

L17000164234

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
18 JAN - 8 PM 2: 29

✓ SALY  
JAN - 9 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Dive IN Residential and Commercial Pool Cleaning Service  
(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:

Peter N Giambrone  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

112 LAUREL WOOD WAY UNIT 103  
(Address)

Saint Augustine FL 32086  
(City/State and Zip Code)

For further information concerning this matter, please call:

Peter Giambrone at (904) 584-0880  
(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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
18 JAN -8 PM 2:23

1. The name of a limited liability company is

DUE IN RESIDENTIAL AND COMMERCIAL POOL CLEANING SERVICE LLC

2. The Articles of Organization were filed on August 1, 2017 and assigned

document number L17000164234

3. The delayed effective date the dissolution if not effective on the date of filing: JAN 10, 2018  
(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).

I HAVE NOT ACQUIRED ANY CLIENTS AND  
FEEL FINANCIALLY BURDENED WITH THE  
COMPANY AT THIS TIME.

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

112 LAUREL WOOD WAY  
UNIT 103

ST. AUGUSTINE FL 32086

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:

Peter N. Giambone  
Signature

PETER N GIAMBONE  
Printed Name

**FILING FEE: \$25.00**