

L180000 59263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

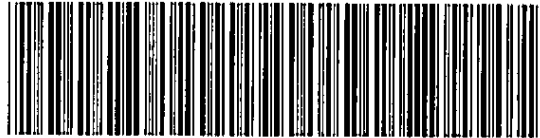
(Business Entity Name)

(Document Number)

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FILED  
19 MAR 27 AM 10:58  
S. YOUNG  
TALLAHASSEE, FLORIDA

MAR 28 2019

S. YOUNG



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 16, 2019

MICHELLE FLANNERY  
TRUSTED HELP AT HOME  
448 85TH AVENUE  
ST PETE BEACH, FL 33706

SUBJECT: TRUSTED HELP AT HOME, LLC  
Ref. Number: L18000059263

We have received your document for TRUSTED HELP AT HOME, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A DESCRIPTION OF OCCURRENCE OF DISSOLUTION

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young  
Regulatory Specialist II

Letter Number: 919A00005280

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2019 MAR 27 PM 2:44

SECRETARY OF STATE  
TALLAHASSEE, FL

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Trusted Help AT HOME  
(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:

Michelle Flannery  
(Name of Person)  
Trusted Help at Home  
(Firm/Company)  
448 85<sup>th</sup> AVE  
(Address)  
ST. Pete Beach, FL 33706  
(City/State and Zip Code)

For further information concerning this matter, please call:

Michelle Flannery at 727, 215-6467  
(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

Trusted Help AT HOME

2. The Articles of Organization were filed on 3/6/18 and assigned

document number L18000059263

3. The delayed effective date the dissolution if not effective on the date of filing: 3/6/19.

(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).

failed Business / Not profitable.

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

MICHELLE FLANNERY

448 85<sup>th</sup> AVE

ST. Pete Beach, FL 33706

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:

Michelle Flannery  
Signature

Michelle Flannery  
Printed Name

**FILING FEE: \$25.00**

FILED  
19 MAR 27 AM 10:58  
SEC. OF STATE  
TALLAHASSEE, FLORIDA