

L18000143864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

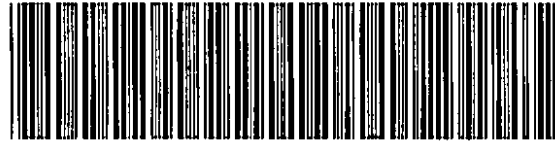
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 MAR -5 PM 1:12

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MAR 30 2021



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 13, 2021

DIEGO OSORIO  
P.O. BOX 273102  
BOCA RATON, FL 33427

SUBJECT: XPROSERVICES, LLC  
Ref. Number: L18000143864

We have received your document for XPROSERVICES, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 421A00003249

## COVER LETTER

TO: Registration Section  
Division of Corporations  
XPROSERVICES, LLC

SUBJECT: \_\_\_\_\_  
(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:

Diego Osorio

\_\_\_\_\_  
(Name of Person)

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

PO BOX 273102

\_\_\_\_\_  
(Address)

Boca Raton, FL 33427

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Diego Osorio

305

240-8606

\_\_\_\_\_  
(Name of Person)

at (\_\_\_\_\_) \_\_\_\_\_

(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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

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1. The name of a limited liability company is  
XPROSERVICES, LLC

2. The Articles of Organization were filed on June 11, 2018 and assigned  
document number L18000143864

December 31st, 2020

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).

Lack of work.

Lack of work.

Lack of work.

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

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

Diego Osorio

Printed Name

**FILING FEE: \$25.00**