118000 729148

(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:					





000346063760

06/15/20--01033--006 **25.00

- TAI LENT

วกลา Jun 15 PH 5: 28

COVER LETTER

TO:

Registration Section

TO:	Registration Section Division of Corporations	<i>3</i>			
SUBJE	Alliance Restoration & Roofing, LLC				
SOBAT,		ted Liability Company)			
The enc	closed Articles of Dissolution and fee(s) are submit	tted for filing.			
Please 1	return all correspondence concerning this matter to	the following:			
	Leo E Sauer				
	(Na	nie of Person)			
	Alliance Construction & Cabinetry, Inc.				
	(Firm/Company)				
	8078 Dillman Road				
	(Address)				
	West Palm Beach, FL 33411				
	(City/St	ate and Zip Code)			
For furt	ther information concerning this matter, please call	l:			
	Leo Sauer	561 784-9135 at ()			
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Englose	d is a check for the following amount:				
5	\$25,00 Filing Fee and Certificate of Dissolution	☐ \$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
	Mailing Address:	Street Address:			
	Registration Section Division of Corporations	Registration Section Division of Corporations			
	P.O. Box 6327	The Centre of Tallahassee			
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The	name of a limited liability	company is		
All	ance Restoration & Roofing	LLC		
2. The	Articles of Organization	were filed on 09/26/2018	_ and assig	med
	ument number L18000229			2020 JUN
<u>No</u>	effective da te: If the date inserted in thi	dissolution if not effective on the cannot be prior to or more than 90 of a block does not meet the applicable date on the Department of State	days later than date document is a le statutory filing requirement	eccived for filin
4. A 6 605	escription of occurrence th 0707, Florida Statutes, (ed My Many Mass	nat resulted in the limited liabiliopy 605.0707 on back cover lett	ty company's dissolution p cr). Has Mo funds	trsuant to section
	nere are no members, enter	the name and address of the po Leo E. SAuc	R	the company's
		8078 D'HMA W. Pasm Beach	x RD , F2 3341)	
6. Sig above	nature of an authorized per to wind up the company's	rson or if there are no members activities and affairs:	, the signature of the person	appointed and listed
-/-/	OC Staul	<i>]</i>	LO L SAA	er

FILING FEE: \$25.00