

L19 000168982

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

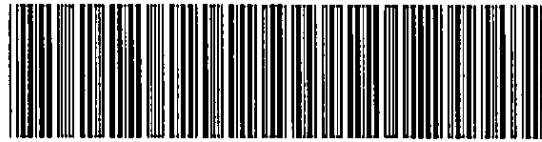
(Document Number)

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JUL 27 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PREFERRED AUDITING COMPLIANCE SAFETY SERVICES, LLC
(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:

LISA MARIE WEIDE
(Name of Person)

PREFERRED AUDITING COMPLIANCE SAFETY SERVICES, LLC
(Firm/Company)

1009 BEL AIRE DR.
(Address)

DAYTONA BEACH, FL 32118
(City/State and Zip Code)

For further information concerning this matter, please call:

LISA M WEIDE at (386) 316-1994
(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)

1363, dtd 6/4/20
PREVIOUSLY SUBMITTED

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

7/22/2020 1:14 PM

June 23, 2020

LISA M. WEIDE
1009 BEL AIRE DRIVE
DAYTONA BEACH, FL 32118

SUBJECT: PREFERRED AUDITING COMPLIANCE SAFETY SERVICES LLC
Ref. Number: L19000168982

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The limited liability company must complete and submit a Voluntary Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited liability company on our records. The fee to file both the Voluntary Dissolution and Notice of Dissolution is \$25.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 020A00012418

Helia

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

1. The name of a limited liability company is

PREFERRED AUDITING COMPLIANCE SAFETY SERVICES, LLC.

2. The Articles of Organization were filed on 06/27/2019 and assigned

document number L19000168982

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).

I HAVE FAMILY MATTERS THAT REQUIRE MY FULL
ATTENTION, WHICH DISTRACT ME FROM FOCUSING
ON MY WORK. I DECIDED TO RESIGN/WITHDRAW
ALL SERVICES I PROVIDE TO OTHER COMPANIES/PEOPLE.

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

1009 BEL WIRE DR

DAYTONA BEACH, FL 32118

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:

Lisa M Weide
Signature

LISA M WEIDE
Printed Name

FILING FEE: \$25.00

7/27/2019 - 6 AM 10:02