119000175491

(Reque	estor's Name)		
(Addre	ss)		
(Addre	ss)		
(City/Si	tate/Zip/Phone #)		
PICK-UP	WAIT	MAIL	
(Busine	ess Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
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Lum:k	·		

Office Use Only



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01/08/24--01020--013 **25.00

COVER LETTER

	Registration Section Division of Corporations				
SUBJEC	Cates Services, LLC				
(Name of Limited Liability Company)					
The enclo	osed Articles of Dissolution and fee(s) are submit	ued for filing.			
Please ret	urn all correspondence concerning this matter to	the following.			
	Maurice Cates				
	(Name of Person)				
	Cates Services, LLC				
	(Firm/Company)				
	4129 Pinto Rd				
		(Address)			
	Middleburg, Fl. 32068				
	(City/St	ate and Zip Code)			
For furth	er information concerning this matter, please call	i:			
	Maurice Cates	904 229-7074 at ()			
-	(Name of Person)	at () (Area Code & Daytime Telephone Number)			
Enclosed i	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:	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 liabi Cates Services, LLC	lity company is		
2.	The Articles of Organization	on were filed on December 31, 2023 and assigned		
	document number 1.190001			
3.	teffective Note: If the date inserted in	e the dissolution if not effective on the date of filing: ive date cannot be prior to or more than 90 days later than date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will not be fective date on the Department of State's records.		
4,	A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liability company's dissolution pursuant to section (copy 605.0707 on back cover letter).		
Have a full-time job in the private sector. Not able to operate this basiness.				
5.	If there are no members, er activities and affairs.	iter the name and address of the person appointed to wind up the company's. Maurice Cates		
		4129 Pinto Rd C ·		
		Middleburg, F1. 32068		
6. at	Signature of an authorized pove to wind up the company	person or if there are no members, the signature of the person appointed and lister's activities and affairs:		
	(· //s=	Maurice R. Cates		
_	Signature	Printed Name		

FILING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company;	
Document number of Limited Liability Company is: L19000175491	
Date of dissolution was: December 31, 2023	
Description of information that must be included in a written claim:	
	. :
	_
Mailing address where claims can be sent. (Claims cannot be sent to the Division of Cor	rporations)
	<u> </u>
	

Maux le R Cifes

A claim against the above named limited liability company will be barred unless a proceeding to enforce the

Printed Name of the Person ruing

claim is commenced within 4 years after the filing of this notice.

Signature of the Person Filing