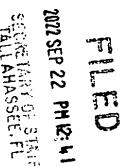
L19000232735

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		



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09/22/22--01015--015 **25.00



Office Use Only

COVER LETTER

TO:

Registration Section Division of Corporations

	<i>♦</i>			
SUBJECT: AVR PRO TER	LhC			
(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:				
	<u>.</u>			
	1125			
Edward (Kony) West				
(name c				
NARC				
(Firm/C	ompany)			
	, -			
1501 Lake Aue SE				
(Auk	nc33;			
Larco, FL	3 3 77 1 nd Zip Code)			
(City/State a	nd Zip Code)			
For further information concerning this matter, please call:				
./				
(Name of Person)	at (72) 902 9297			
(Name of Person)	(Area Code & Daytime Telephone Number)			
For the old in a should fee the full action property				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee and Certificate of Dissolution	S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)			
	commence copy (additional copy is encoured)			
Mailing Address:	Street Address:			
Registration Section	Registration Section			
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810			
Tallallassee, 1 5 5 25 1	Tallahassee, FL 32303			

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

1. The name of a limited liability company		2922 SEP 22 PM 12: 1
Air-Pro T+3	LLC	SECRETARY OF STATE
2. The Articles of Organization were filed	on 09/16/2019	IALLAHASSEE.FL and assigned
document number <u>L 19000</u> 2	132735	
3. The delayed effective date the dissolution (effective date cannot be Note: If the date inserted in this block doed listed as the document's effective date on the second secon	es not meet the applicable statutory filing r	9-1-22 locument is received for filing) equirements, this date will not be
4. A description of occurrence that resulte 605.0707, Florida Statutes, (copy 605.0)	707 on back cover letter)	
This Corparation	has not work	going On
/ 1		
5. If there are no members, enter the name	and address of the person appointed to	o wind up the company's
activities and affairs:	my West	
150	OI Lake Ave SE	.,
	RSO, FL 33771	
6. Signature of an authorized person or if above to wind up the company's activities	there are no members, the signature of and affairs:	the person appointed and listed
	Edward	Kwest
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: Air - PROTEB LLC
Document number of Limited Liability Company is: <u>L 19000232 735</u>
Date of dissolution was: $9 - 1 - 22$
Description of information that must be included in a written claim:
This Corporationis not being used
SEE NOT SEP 22
in the second
Mark B
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
1501 Lake Ave SF
Laego, FL 3377/
A claim against the above named limited liability company will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Edward K West Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00