KZI 000055111

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
		MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	<u>_</u>	
	Office Use On	ly





(LIS NJD155

FEB 2 2 2022

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: <u>AV Cooling Services LLC</u> (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:

Jose V. Avilla (Name of Person) AV Cooling Services LLC (Firm Company) A860 Siv G1st Are (Address) MIAMI FL 33165 (City/State and Zip Code)

For further information concerning this matter, please call:

Jose V. Avila at <u>305</u>, 219 6448 (Name of Person) (Area Code & Davtime Telephone Number)

Enclosed is a check for the following amount,

12 \$25,00 Filmg Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution & Centified 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
	A LIMITED LIABILITY COMPANY
1. The name of a limited lia <u>AV</u> Coc	bility company is pling Services LLC
2. The Articles of Organizat	tion were filed on February 01 2021 and assigned
document number <u>L2</u>	1000055111
Note: If the date inserted i	The dissolution if not effective on the date of filing: $\frac{02/28/2022}{02}$ tive date cannot be prior to or more than 90 days later flian date document is received for filing) in this block does not meet the applicable statutory filing requirements, this date will no fective date on the Department of State's records.
605.0707. Florida Statutes	nce that resulted in the limited liability company's dissolution pursuant to sections. (copy 605,0707 on back cover letter).
tar health	reasons, 7 am closing The Campany
tor health and retir	neasons, 7 am closing The Company
tor health and retir	neasons, 7 au closing The Company ing
tor health and retir	neasons, 7 am dosny The Company
and retir	<u>neasons</u> , <u>Fam dorng The Company</u>
and retin 5. If there are no members, o	enter the name and address of the person appointed to wind up the company's
S. If there are no members, o	in <u>z</u>
6. Signature of an authorized	enter the name and address of the person appointed to wind up the company's <u>Jose V. Ávila</u> <u>4860 SW 91st Ave, Mianui FL 3316</u> d person or if there are no members, the signature of the person appointed and I
5. If there are no members, of activities and affairs:	enter the name and address of the person appointed to wind up the company's <u>Jose V. Ávila</u> <u>4860 SW 91st Ave, Mianui FL 3316</u> d person or if there are no members, the signature of the person appointed and I