

K21 000214176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

APR 25 PM 1:03

FILED

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** PAS Roofing 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:

Philip Staines

\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

5635 Charles Pl

\_\_\_\_\_  
(Address)

New Orleans, LA

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Philip Staines

\_\_\_\_\_  
(Name of Person)

504

913-1916

at (

\_\_\_\_\_) \_\_\_\_\_  
(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)

**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  
FOR  
A LIMITED LIABILITY COMPANY

FILED

APR 25 PM 4:11

SECRETARY OF STATE  
TALLAHASSEE, FL

1. The name of a limited liability company is  
PAS Roofing LLC

2. The Articles of Organization were filed on 5-7-2021  
document number L21000214176

3. The delayed effective date the dissolution if not effective on the date of filing: 4-15-22  
(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).

Owner moved to a different state and is employed elsewhere.

Owner moved to a different state and is employed elsewhere.

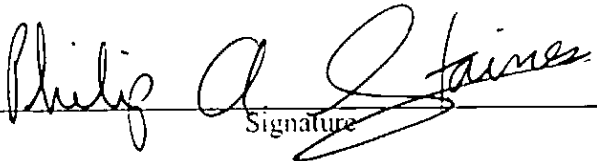
Owner moved to a different state and is employed elsewhere.

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

5635 charles place

New Orleans, LA 70124

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:

  
Signature

Philip A Staines

Printed Name

FILING FEE: \$25.00