## 00029474

(Req	uestor's Name	)			
(Addı	ress)				
(Addr	ress)				
(City/	State/Zip/Phor	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Busi	ness Entity Na	me)			
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Fil	ling Officer:				

Office Use Only



200415024262

10/27/23--01003--006 \*\*25.00

RECEIVED

OCT 27 2023 <. Brumbley

## **COVER LETTER**

то:		tration Second						
SUBJE	CT:	RESID	EMÏAL	EXTENS	HEATING	AM	(ounk,	LLC.
				(Name of	Limited Liability	Company	)	
The enc	losed A	articles of	Dissolution	and fee(s) are s	ubmitted for filin	g.		
Please r	eturn al	ll correspo	ondence conc	erning this mat	ter to the followi	ng:		
			DM	na 1º	(Name of Person  Extens  (Firm/Company)			
			Λ	•	(Name Of reison			
			14	Birmin	EMENTS			
					(Firm/Company)			<del></del>
			13	70	5 cs0 P1647	CT,		
					(Address)		<i>.</i>	
				JERATI	(Address)    Sur (I)     ity/State and Zip C	ħ	32553	
			<del>-</del>	(C	ity/State and Zip C	ode)		
For further information concerning this matter, please call:								
	DA	N9L	Barn	1	at (	321	966	.5657
			(Name of P	erson)		(Area Code	& Daytime Tele	phone Number)
Enclosed	l is a che	ck for the I	following amo	unt:				
Ē	\$25.00	Filing Fee	and Certifica	te of Dissolution		_	e, Certificate of L y (additional copy	
	Regis Divis P.O.	Box 632	Section orporation	S	Regis Divis The C 2415	entre of	rporations Tallahassee oe Street, Sui	te 810

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

	The name of a limite	ed liabil	lity company is					
	165,00	in	Empena	HEATING	AMO	LioLWh	LLC	
	The Articles of Orga	ınizatio	n were filed on	1/17	123	a	nd assigned	
	document number _	L23	0000 2447	4				
	The delayed effective Note: If the date insolisted as the document	effective erted in t	date cannot be prio This block does no	or to or more than it meet the appl	i 90 days 1 icable sta	ater than date doc tutory filing requ	iment is receive irrements, this	ed for filing) s date will not
	A description of occ 605.0707, Florida Sta	urrence itutes, (	that resulted in copy 605.0707	the limited lia on back cover	ibility co letter).	ompany's disso	lution pursua	ant to section
	Flor	15	Furina	5nu 4	PE	FORE19N		
	If there are no memb		ter the name and	I address of th	e person	appointed to v	rind up the c	ompany's
)+	Signature of an autho	orized p inpany	person or if there's activities and	are no memb	ers, the	signature of the	person appo	ointed and lis
_	May Signa		7		DANI	a L P	ANN	
`			FI	LING FEE:	\$25.00	i illica ist	:-	202:

OCT 27 AM 10: 55