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(Document Number)						
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## **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT: AT Pro Windows, L	BJECT: Al Pro Windows, ILC						
(Name of Limited	d Liability Company)						
The enclosed Articles of Dissolution and fee(s) are submitted	ed for filing.						
Please return all correspondence concerning this matter to the	ne following:						
to a	ic ronowing.						
Juan D. Kodriguez							
(Name of Person)							
AI Pro Roofing, LLC							
(Firm/Company) U							
/ 1	- 1						
610 NW 1+	610 NW 17 St (Address)						
(A	Beach Fl 33060 (City/State and Zip Code)						
On Don the	Mano Beach Fl 33060 (City/State and Zip Code)  matter, please call:						
Vomyano Da	and Vin Coda)						
(Chystate	and z.p Code)						
For further information concerning this matter, please call:							
$O_{\lambda}$							
Tahola Rodriguez at 954 ) 955-0265							
(Name of Person)	(Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:							
X \$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	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						
	Tallahassee, FL 32303						

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

. The name of a limited liabi	lity company is	S		2027 J.	
<u> </u>	Pro	window	S, Ll	<u></u>	- 10 /m
. The Articles of Organization	on were filed or	0410	4/2		. ,
document number <u>L 2L</u>	10001613	388			
The delayed effective date (effective Mote: If the date inserted in listed as the document's effe	this block does	not meet the applic	cable statu	tory filing requirements, this d	for filing) ate will not b
A description of occurrence 605.0707, Florida Statutes,	e that resulted i	in the limited liab 7 on back cover	bility con letter).	npany's dissolution pursuam	t to section
The Owner Just	doesn	want the	Ш	anymore.	
If there are no members, er activities and affairs:	nter the name a	_	e person a	• • •	mpany's
	_610_r	FI wo	St		
	Pompan	o Beach	Pl	33060	
Signature of an authorized pove to wind up the company	person or if the	ere are no membe nd affairs:	ers. the si	gnature of the person appoi	nted and lis
A)			ن	ton P. Rodrigue	2
Signature				Printed Name 0	
r		FILING FEE: S	\$25.00		