P15000076515

Office Use Only



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C. CARROTHERS



July 6, 2016

LOY D METCALF PO BOX 1150 ALTOONA, FL 32702

SUBJECT: DOUBLE L CONSTRUCTION SERVICE, INC.

Ref. Number: P15000076515

We have received your document for DOUBLE L CONSTRUCTION SERVICE, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A SIGNATURE IS REQUIRED ON THE NOTICE OF DISSOLUTION

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 816A00014110

Cathy A Carrothers Regulatory Specialist

www.sunbiz.org

Division of Comparations BO POV 6227 Tollahagasa Florida 22214

COVER LETTER

TO: Amendment Section **Division of Corporations**

Tallahassee. FL 32314

SUBJECT: DOUBLE L CON	STRUCTION SE	RVICE, INC.	
DOCUMENT NUMBER:	P15000076515		
The enclosed Articles of Di	ssolution and f	fee are submitted for fil	ing.
Please return all correspond	ence concernin	g this matter to the follo	owing:
	LOY D. ME	TCALF	
	(Name of	Contact Person)	
DOL	IBLE L CONSTR	UCTION SERVICE, INC.	•
	(Fir	m/Company)	
P.O. BOX 1150			
	(A	(ddress)	
	AL	TOONA, FL 32702	
	(City/Sta	ate and Zip Code)	·····
For further information cond	cerning this ma	itter, please call:	
LOY D. METCALF		at (:
(Name of Contact	Person)		(Daytime Telephone Number)
Enclosed is a check for the	following amou	unt:	
\$35 Filing Fee \$43.75 Certific			2 \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327		An Div	REET ADDRESS: nendment Section vision of Corporations fton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State: DOUBLE L CONSTRUCTION SERVICE, INC.			
SECOND:	The document number of the corporation (if known):			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable: JUNE 19, 2016 (to more than 90 days after dissolution file date)			
	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.			
FOURTH:	Adoption of Dissolution (CHECK ONE)			
	Dissolution was approved by the shareholders. The number of votes cast for dissolution-was sufficient for approval.			
	Dissolution was approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled.			
	The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:			
	The number of votes cast for dissolution was sufficient for approval by			
	(voting group)			
	Signature: (By a director, president or other officer) if directors or officers have not been selected, by an incorporator - if in the hands of a regeiver, trustee, or other court appointed fiduciary, by that fiduciary)			
	LOY D. METALF			
	(Typed or printed name of person signing)			
	PRESIDENT			
	(Title of person signing)			

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:

DOUBLE L CONSTRUCTION, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

NAME, ADDRESS AND PHONE NUMBER OF CLAIMANT

BASIS OF CLAIM

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

POB: 1150, ALTOONA, FL 32702

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

Printed Name of the Person Filing

Signature of the Person Filing