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COVER LETTER

TO:

Registration Section

Dív	ision of Corporations	·
SUBJECT:	SIMTAYCOR LLC	
SOBJECT.	(Name of Limit	ed Liability Company)
The enclosed	Articles of Dissolution and fee(s) are submitted	ed for filing.
Please return	all correspondence concerning this matter to	the following:
	Andrew J Cork	
	. (Nan	ne of Person)
	(Fig.	n/Company)
(Firm/Company) 4012 Buttonbush Dr (Address)		is Company)
		Address)
	Milton, Fl 32583	
	(City/Sta	te and Zip Code)
For further in	formation concerning this matter, please call:	
An	drew Cork	850 380-8840
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a c	check for the following amount:	
√ \$25.0	00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
	MAILING ADDRESS:	STREET/COURIER ADDRESS:

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is SIMTAYCOR LLC
2.	The Articles of Organization were filed on
	document number <u>L12000127177</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: Immediate (effective date cannot be prior to or more than 90 days later than date document is received for filing)
e	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 505.0707, Florida Statutes, (copy 605.0707 on back cover letter).
_	Business Closed
-	
-	
	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs: BRIAN SIMPDE SR
	4332 JERNIGAN RD
	PACE, FL 32571
6. : liste	Signature of an authorized person or if there are no members, the signature of the person appointed and ed above to wind up the company's activities and affairs:
	andrew J Cork
v	Signature Printed Name 57
	FILING FEE: \$25.00 FILING FEE: \$25.00 ALLAHASSEE, FLO