

W4000103947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

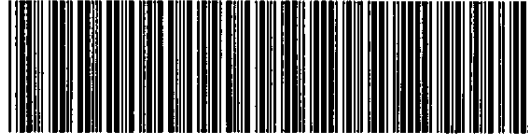
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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03/02/15--01017--028 \*\*25.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 17 2015  
S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SELECT EQUITY 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:

Andrae Bouie  
(Name of Person)  
N/A  
(Firm/Company)  
3360 NE 14 Dr. Apt. 210  
(Address)  
Homestead, FL 33033  
(City/State and Zip Code)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Andrae Bouie at ( 305 ) 307-9864  
(Name of Person) (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/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  
SELECT EQUITY LLC
2. The Articles of Organization were filed on 06/30/2014 and assigned  
document number L14000103947
3. The delayed effective date the dissolution if not effective on the date of filing: N/A  
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
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).  
The company's name might be construed as infringing on the preexisting trademark  
rights of a company with a similar name.
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs: Andrae Bouie  
3360 NE 14 Dr. Apt. 210  
Homestead, FL 33033
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:

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TALLAHASSEE FLORIDA

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\_\_\_\_\_  
Signature

Andrae Bouie  
\_\_\_\_\_  
Printed Name

**FILING FEE: \$25.00**

## Notice of Limited Liability Company Dissolution

**NOTE: This page is optional**

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

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

Name of Limited Liability Company: SELECT EQUITY LLC

Document number of Limited Liability Company is: L14000103947

Date of dissolution was: \_\_\_\_\_

Description of information that must be included in a written claim:

Nature of business conducted.

Time and date business was conducted, documented proof of services

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

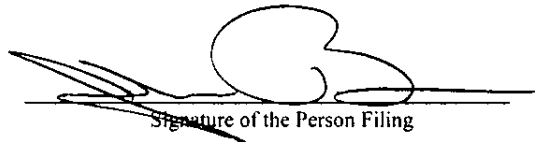
3360 NE 14 Dr. Apt. 210

Homestead FL 33033

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

Andrae Bouie

Printed Name of the Person Filing

  
Signature of the Person Filing

**Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00**