

L10000035080

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

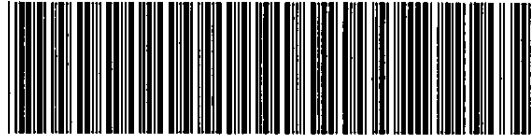
(Business Entity Name)

(Document Number)

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

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100261616451

07/11/14--01014--018 \*\*25.00

FILED  
CLERK OF SUPERIOR COURT  
JUL 11 2014

FILED  
JUL 11 2014

EFFECTIVE DATE

07/31/14

JUL 15 2014

D. BRUCE

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Paw Walker 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:

Christine Santora

(Name of Person)

The Paw Walker LLC

(Firm/Company)

11730 Winding Woods Way

(Address)

Lakewood Ranch, FL 34202

(City/State and Zip Code)

For further information concerning this matter, please call:

Christine Santora

(Name of Person)

at 941

704-6576

(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

2014 JUL 11 PM 12:25

FILED

## ARTICLES OF DISSOLUTION FOR

1. The name of a limited liability company is  
The Paw Walker LLC
2. The Articles of Organization were filed on 01/14/2008 and assigned  
document number L10000035080
3. The delayed effective date the dissolution if not effective on the date of filing: 7/31/2014  
(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).  
No longer operating business
5. If there are no members, enter the name and address of the person appointed to wind up the company's  
activities and affairs:
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:

 Signature

**Christine Santora**  
Printed Name

**FILING FEE: \$25.00**

EFFECTIVE DATE 07/31/14

JUL 11 PM 12:25  
STAFF:  
POINTED AND

77