L12000149723

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O SIMMONS APR 17 2017

COVER LETTER

	stration Section ion of Corporations			
SUBJECT:	24 PULPIT ROCK ROAD RE	ALTY, LLC		
_	(Name of Limit	ed Liability Company)		
	Articles of Dissolution and fee(s) are submitt			
	MARK G. SYLVIA, ESQ.			
	(Nan	ne of Person)		
	SALTER MCGOWAN SYLVIA & LEONARD (Firm/Company)			
	321 SOUTH MAIN STREET, SUITE 301			
	(Address)			
	PROVIDENCE, RI 02903			
	(City/Sta	te and Zip Code)		
For further inf	formation concerning this matter, please call:			
	MARK SYLVIA	at (40i) 274-0300		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a ch	neck for the following amount:			
Ø \$25.0	0 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	Registration Section Division of Corporations		
	P.O. Box 6327	Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l	The name of a limited liability company is 24 PULPIT ROCK ROAD REALTY, LLC	
2.	The Articles of Organization were filed on Noven	aber 29, 2012 and assigned
	document number L12000149723	
3.	The delayed effective date the dissolution if not e (effective date cannot be prior to or a Note: If the date inserted in this block does not meet listed as the document's effective date on the Department.	more than 90 days later than date document is received for filing) the applicable statutory filing requirements, this date will not be
4.	A description of occurrence that resulted in the lin 605.0707, Florida Statutes, (copy 605.0707 on back)	mited liability company's dissolution pursuant to section ek cover letter).
	The Company will cease to exist as a separate legal ent	ity.
	Action by sole member to dissolve t	the LLC
5.	If there are no members, enter the name and addresset activities and affairs:	ess of the person appointed to wind up the company's
6. lis	Signature of an authorized person or if there are noted above to wind up the company's activities and	no members, the signature of the person appointed and affairs:
<u>/</u>	- ill !!	Rochelle Gunning
•	Signature	Printed Name

FILING FEE: \$25.00