111000143757

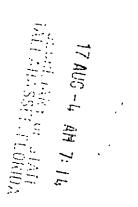
| (Requestor's Name) | | | | |
|---|------------------------|--|--|--|
| (Address) | | | | |
| (Address) | | | | |
| (City/State/Zip/Phone #) | | | | |
| PICK-UP | WAIT MAIL | | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | Certificates of Status | | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
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Office Use Only



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AUG 0 7 2017 J SHIVERS

COVER LETTER

TO:

Registration Section Division of Corporations

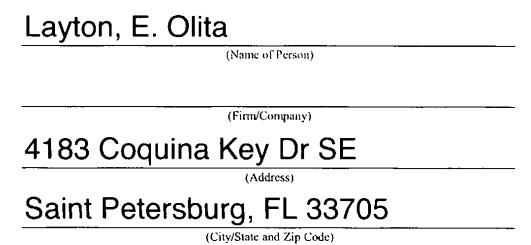
SUBJECT:

FUSBALLC

(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:



E. Olita Layton

(Name of Person)

 $\frac{1}{4}$ $\frac{1}{2}$ $\frac{1}{3}$ $\frac{33}{5}$

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$25.00 Filing Fee and Certificate of Dissolution

For further information concerning this matter, please call:

□ \$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 l | liability company is | | | |
|--|--|---|--|--|
| 2. The Articles of Organiz | zation were filed on $\frac{12/23}{}$ | 2011 | and assigned | |
| document number L110 | 000143757 | | | |
| Note: If the date inserte | late the dissolution if not e ective date cannot be prior to or a d in this block does not meet effective date on the Departm | more than 90 days later that the applicable statutory f | filing: 8/1/2017 n date document is received for filing) filing requirements, this date will not | |
| A description of occurr 605.0707, Florida Statu | ence that resulted in the littes, (copy 605.0707 on bac | nited liability compan k cover letter). | y's dissolution pursuant to section | |
| Company closed due to la | | · | | |
| 5. If there are no members | | ess of the person appoi | inted to wind up the company's | |
| activities and affairs: | E. Olita Layton | | | |
| | 4183 Coquina Key DI | ₹ SE | 7: 11 CORI | |
| | Saint Petersburg, FL 3 | 33705 | > | |
| Signature of an authorize isted above to wind up the | zed person or if there are not company's activities and | o members, the signat affairs: | ure of the person appointed and | |
| | | Esther O. Layton | | |
| Signature | | Pi | Printed Name | |

FILING FEE: \$25.00