CAYOLAN WISON JAVES  Requester's Name  2740 Kissimmee Ray  Address  City/State/Zip Phone #		<b>40847</b> —-8 ?01072—008 00 *****25.00
CORPORATION NAME(S) & DOCU	Office Use Only  MENT NUMBER(S), (if known):	
1. 344 (D1-21263) (Corporation Name)	dissolution (Document #)	
2. (Corporation Name)	(Document #)	
	(Document #)	
4		
	(Document #)	
Walk in Pick up time	Certified Copy	. –
☐ Mail out ☐ Will wait	☐ Photocopy ☐ Certified Copy ☐ Certificate of S	tatus
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment  Resignation of R.A., Officer/Director of Change of Registered Agent  Dissolution/Withdrawal  Merger	FILED 02 MAR -4 PM
OTHER FILINGS	REGISTRATION/QUALIFICATION	
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	*
CR2E031(7/97)	Examiner's Initia	ls

<u>=</u>.

## ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is	CAROLYN WILSON INVESTMENT REALTY L
2. The effective date of the limited liability con  3. A description of the occurrence that resulted  0section 608.441, Florida Statutes, (copy of occurrence)  Mutual Agreement To d	d in the limited liability company's dissolution pursuant to 608.441 on back of cover letter).
-OR- Adequate provision has been made for the	limited liability company have been paid or discharged.  debts, obligations and liabilities pursuant to s. 608.4421.  an distributed among its members in accordance with their
<ul> <li>6. CHECK ONE:</li> <li>2 There are no suits pending against the components.</li> <li>OR-</li> <li>Adequate provision has been made for the been entered against it in any pending suit.</li> </ul>	pany in any court. satisfaction of any judgment, order or decree, which may
· · ·	Typed or Printed name
Carolyn Wilson	CAROLYN W: SON FLORIDE

Filing Fee: \$25.00