L03000021259

(Re	equestor's Name)		
(Ad	ldress)	·	
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			





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2015 NOV 19 AMII: 16

K.SALY EXAMINER NOV 23 2015

COVER LETTER

TO: Registration Section
Division of Corporations

HW LAND CO 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:

H. LEE WALL		
(Name of Person)		
(Firm/Company)		
212 E HIGHLAND DR SUITE 201		
(Address)		
LAKELAND, FL 33813		
(City/State and Zip Code)		

For further information concerning this matter, please call:

H. LEE WALL at (863) 683-0708

(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

FILED

2015 NOV 19 AM 11: 16

. The name of a limited liabi	lity company is	t to the second
HW LAND CO LLC		DEUKLTARY OF STAI TALLAHASSEE, FLORI
The Articles of Organization	on were filed on 06/12/2003	and assigned
document number L030000	21259	
Note: If the date inserted in	the dissolution if not effective on the deduce cannot be prior to or more than 90 days lathis block does not meet the applicable state tive date on the Department of State's reco	utory filing requirements, this date will not be
A description of occurrence 605.0707, Florida Statutes,	e that resulted in the limited liability co (copy 605.0707 on back cover letter).	empany's dissolution pursuant to section
THE CONSENT OF ALL TH	· ••	
If there are no members, er	ater the name and address of the person	appointed to wind up the company's
activities and affairs:	H. LEE WALL, CPA	
	212 E HIGHLAND DR SUITE 201	
	LAKELAND, FL 33813	
Signature of an authorized ted above to wind up the co	person or if there are no members, the smpany's activities and affairs:	signature of the person appointed and
	H. LEE WAI	LL

FILING FEE: \$25.00