L03000040237

(Re	questor's Name)	
(Ad	dress)	<u> </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	,
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
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02/29/16--01014--002 **\$5.00

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SECKETARY OF STATE

HAR O 2 2016 J. HARRIS

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Ross Equipment Conpan, LLC (Name of Limited Liability Company)			
(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:			
rease return an correspondence concerning this matter to the following.			
Montgonery L. Ross (Name of Person)			
(Name of Person)			
Pass Paulance Comment 166			
Poss Equipment Company LCC (Firm/Company)			
4703 marsh Henk Ct (Address)			
(Address)			
Valcie FL 33596			
Valrico, FL 33596 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Person) at (213) 657-9696 (Area Code & Daytime Telephone Number)			
(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 CEDDENICOVERS ADDRESS			

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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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 liability of	• •
Ross	Equipment Company, LLC
	ere filed on $\frac{0/0/03}{03}$ and assigned
document number <u>LO30</u>	00040237
Note: If the date inserted in this b	dissolution if not effective on the date of filing: $\frac{-3/-16}{1}$ cannot be prior to or more than 90 days later than date document is received for filing) block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.
4. A description of occurrence tha 605.0707, Florida Statutes, (cop	t resulted in the limited liability company's dissolution pursuant to section y 605.0707 on back cover letter).
Closed busi	ness
V	
5. If there are no members, enter the activities and affairs:	he name and address of the person appointed to wind up the company's hontgoney here? 4703 marsh Hank Ct
_	Valato, FL 33596
_	VAINTO, FL 33376
_	
6. Signature of an authorized persolisted above to wind up the compar	on or if there are no members, the signature of the person appointed and ny's activities and affairs:
mygn 1 12 Signature	Montgomeny L Ross Dus -
Signature .	FILING FEE: \$25.00
	ilia B in
	PH 12: 35