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(City/s	  State/Zip/Pho	ne #)
PICK-UP	☐ WAIT	MAIL MAIL
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Special Instructions to Fili	ing Officer.	
	Office Head	



25.00 Exterive: 12,31-19

## **COVER LETTER**

TO: Registration Section Division of Corporations			
	( )		
SUBJECT: Odon Construction LC (Name of Limited Liability Company)			
	raomy Company)		
The enclosed Articles of Dissolution and fee(s) are submitted f	or filing.		
Please return all correspondence concerning this matter to the	following:		
Palast 6 Dds Sc			
Robert & Odon Sr.  (Name of Person)  R. E. Odon, LhC			
0001-110			
27.0 11 1 2	· ·		
2309 Havehill Rd			
	<b>7</b> \ \		
Tallahessee FL (City/State ar	32312 ad Vin Code)		
(City/Maic a	in Zip Code)		
For further information concerning this matter, please call:			
D-1- + 6/01 5.	2-0 545-(EU)-		
Kobert El Odon Sk (Name of Person)	at (850) 345 6546 (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:	STREET/COURIER ADDRESS:		
Registration Section	Registration Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building		
rananassee, fl 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is
	Odon Construction, LLC
2.	The Articles of Organization were filed on $\frac{11}{21}$ and assigned
,	document number <u>L 0300046639</u>
3.	The delayed effective date the dissolution if not effective on the date of filing: \( \frac{12}{31} \) \( \frac{3}{30} \) \( \frac{9}{31} \) \( \f
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	Sharron Odon - Deceased
-	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	2019 NOV 14 PH
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and sted above to wind up the company's activities and affairs:
	78 Oder E Odom Sr.
	Signature Printed Name

FILING FEE: \$25.00