## L03000048/35

(Re	equestor's Name)			
(Address)				
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## **COVER LETTER**

	ration Section on of Corporations			
SUBJECT:	BLACK - SHIELDS	5-266	V	
<u> </u>	(Name of Lim	nited Liability Company)		
		,		
The analoged A	articles of Dissolution and fee(s) are subm	aitead for films		
		_		
Please return al	Il correspondence concerning this matter t	to the following:		
	JOHN C. BLA	CK		
	(N	ame of Person)	7A.S	
			10 A	
	(F	'irm/Company)		
	77-1 41 1 . 55 14	2	PR 19 PH	
	2201 N. G/ F	(Address)	T P	
		(Address)	PHIZ: (	
	Pensacola FL	32506	SEURE DARY OF STATE ALLAHASSEE FLORID	
	(City/S	State and Zip Code)	<b>≈</b> .'' <b>©</b>	
Ean Guidhan is fa	ormation concerning this matter, please ca	.11.		
ror turtiler inte	ormation concerning this matter, please ca	ui:		
70	Ohu C. BLACK	at (850 ) 380	4-6454	
<u> 5</u>	(Name of Person)	at (850) 384 - 6454  (Area Code & Daytime Telephone Number)		
D 1 1' 1				
	eck for the following amount:			
\$25,00 Filing	Fee30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy	
			(additional copy is enclosed)	
	•			
	MAILING ADDRESS:	STREET/COURIER ADDRESS:		
Registration Section Division of Corporations			Registration Section Division of Corporations	
P.O. Box 6327		Clifton Building		
	Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301