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SECRETARY OF STATE
TALLAHASSEF F STATE

D. BRUCE

JUL 3 1 2009

**EXAMINER** 

# **COVER LETTER**

Division of Corporations
SUBJECT: WILLIAM E. Grupp 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:
William Grupp (Name of Person)
William Grupp LLC (Fight/Company)
395 Norwood Ct LARE T
Oviedo FL 32765  (City/State and Zip Code)  (Address)  SSEE OF RECEIVED TO THE PROPERTY OF THE
For further information concerning this matter, please call:
Bill Grupp at (HDN) 682-83n3 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:  \$\sum_{25.00}\$ \text{Filing Fee}  \text{30.00 Filing Fee & Certified Copy (additional copy is enclosed)}  \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}  \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}  \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}  \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}  \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}   \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}   \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}    \text{\$\sum_{25.00}\$ \text{Filing Fee & Certified Copy (additional copy is enclosed)}}      \text{\$\sum_{25.00}\$

### **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

1. The name of a limited liability company is  William Grupp LLC	,
2. The Articles of Organization were filed on 10 - 6 - 2 (13.000050871).	204 and assigned document number
<ul> <li>3. The date the dissolution was approved: 17-31-208</li> <li>4. A description of occurrence that resulted in the limited liability co 608.441, Florida Statutes, (copy 608.441 on back cover letter).</li> </ul>	
Due to economic cond decided to shut down	itions we have
<ul> <li>5. CHECK ONE:</li> <li>All debts, obligations and liabilities of the limited liability OR-Adequate provision has been made for the debts, obligations.</li> <li>6. All remaining property and assets have been distributed among its rights and interests.</li> <li>7. CHECK ONE:</li> <li>There are no suits pending against the company in any control of the company in any pending suit.</li> </ul>	ons and liabilities pursuant to s. 608.4421.  members in accordance with their respective purt.
Signatures of the members having the same percentage of membership	interests necessary to approve the dissolution:
Signature	Printed Name
Me X Styles	WILLIAM F. Grupp
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FILING FEE: \$25.00