# L04000038055

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SECRETAL AND SECRETARY OF STATE

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## TRANSMITTAL LETTER

TO: Registration Se Division of Co				
SUBJECT: E	VOLVE Propi	ertics LLC imited Liability Company)	<del></del>	
The enclosed Articles o	f Dissolution and fee(s) are subr	mitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:	SECUL TALLA	
_	Denise L	McDowell (Name of Person)	26 PH 3: 1	
		Ofrtics LLC (Firm/Company)	A P	
	103 Patric	(A 57, (Address)  7/. 3 4715  (/State and Zip Code)		
_/	MINNEOla (City	7/. 3 4715 (/State and Zip Code)		
For further information concerning this matter, please call:				
Den	(Name of Person)	Ourclat (352) 39 (Area Code & Daytime	Telephone Number)	
Enclosed is a check for the following amount:				
☐ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	<ul> <li>\$55.00 Filing Fee &amp; Certified Copy (additional copy is enclosed)</li> </ul>	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy	

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

(additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 24, 2005

DENISE MCDOWELL 103 PATRICIA STREET CLERMONT, FL 34715

SUBJECT: EVOLVE PROPERTIES, LLC

Ref. Number: L04000038055

We have received your document for EVOLVE PROPERTIES, LLC and check(s) totaling \$35.00. However, your check(s) and document are being returned for the following:

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 405A00053736

# ARTICLES OF DISSOLUTION FOR A FLORIDA LIMITED LIABILITY COMPANY

1. The name of the limited liability company is  Evolve Properties, a	1,46
2. The date the dissolution was approved:	<u> </u>
3. A description of the occurrence that resulted in the section 608.441, Florida Statutes, (copy of 608.441)	
we never bought, so	old or did any business
We Never bought, so	
	A. 95
	AH.
	55 P
4. CHECK ONE: All debts, obligations and liabilities of the limited -OR-	liability company have been paid of discharged.
Adequate provision has been made for the debts, o	bligations and liabilities pursuant to 608.4421.
<ol><li>All remaining property and assets have been distril respective rights and interests.</li></ol>	outed among its members in accordance with their
6. CHECK ONE: There are no suits pending against the company in -OR-	any court.
Adequate provision has been made for the satisfact be entered against it in any pending suit.	tion of any judgment, order or decree which may
Signatures of the members having the same percent the dissolution :	age of membership interests necessary to approve
Signature J M Lloyell	Typed or Printed name, Ac Donell
Lugar D. Merkeevell_	Gregory D. Mc Donell