# 104000083856

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

TO:

Registration Section Division of Corporations

SPECIAL OPERATIONS, 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:

## DIANE SUNDERLAND

(Name of Person)

THE TITLE COMPANY OF SOUTH FLORIDA

(Firm/Company)

2700 W. CYPRESS CREEK RD, SUITE B111

(Address)

FT.LAUDERDALE, FL 33309

(City/State and Zip Code)

For further information concerning this matter, please call:

## DIANE SUNDERLAND

.954

9356034

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee and Certificate of Dissolution

S55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

#### **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

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#### ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited liabi SPECIAL OPERATIONS IN			,
2. The Articles of Organization	on were filed on 11/18/2	2004	and assigned
document number L040000	83856	<del>_</del>	
	this block does not meet	the applicable statutory filing	g: 09/28/2012 document is received for filing) requirements, this date will not be
4. A description of occurrence 605.0707, Florida Statutes, LACK OF FILING ANNUAL	(copy 605.0707 on bac	nited liability company's d k cover letter).	dissolution pursuant to section
			19 M
5. If there are no members, en activities and affairs:	ter the name and addre	ess of the person appointed	1
	441 LAKE TREE DR	IVE	
	FT. LAUDERDALE,	FL 33326	
6. Signature of an authorized listed above to wind up the con	person or if there are n mpany's activities and	o members, the signature of affairs:	of the person appointed and
KIM Signature	<u>'</u>	KIYOKO HICKEY Printe	d Name
Coal +	12 Dus H	CAR 1 5. F	tickey

### Notice of Limited Liability Company Dissolution

#### NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

ame of Limited Liability Company: SPECIAL OPERATIONS INVESTMENTS, LLC	<del>,</del>
ocument number of Limited Liability Company is: L0400083856	_
ate of dissolution was: 09/28/2012	
escription of information that must be included in a written claim:	
IONE	
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alling address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	
441 LAKE TREE DRIVE	
FT. LAUDERDALE, FL 33326	
	•
FT. LAUDERDALE, FL 33326	٠

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00

A claim against the above named limited liability company will be barred unless a proceeding to enforce the

claim is commenced within 4 years after the filing of this notice.

KIYOKO HICKEY