L05000005921

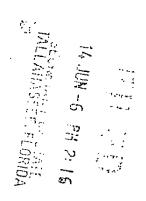
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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06/06/14--01018--002 **25.00



COVER LETTER

TO:	Registration Section Division of Corpora						
CHDIE	Peble Florid	la, LLC					
SUBJE	(Name of Limited Liability Company)						
The end	losed Articles of Dis	solution and fee(s) are submit	ted for filing.				
Please	eturn all corresponde	nce concerning this matter to	the following:				
	Sherry ⊢	owell					
	(Name of Person)						
The Peble Corp. (Firm/Company)							
	609 Elmwood Drive						
	(Address)						
	Meridian	, MS 39301					
	The Peble Corp. (Firm/Company) 609 Elmwood Drive (Address) Meridian, MS 39301 (City/State and Zip Code) er information concerning this matter, please call: Sherry Howell (Name of Person) (Area Code & Daytime Telephone Number)						
For fur	her information conc	erning this matter, please call	:				
Sherry Howell			693-0602				
	(1	ame of Person)	(Area Code	e & Daytime Telephone Number)			
Enclose	is a check for the folk	wing amount:					
✓ \$25.00 Filing Fee and Certificate of Dissolution							
		IG ADDRESS:		ET/COURIER ADDRESS:			
	_	ion Section of Corporations	-	ration Section on of Corporations			
	P.O. Box			ı Building			

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is Peble Florida, LLC	
2.	The Articles of Organization were filed on January 19, 2005 and assigned	
	document number L05000005921	
3.	The delayed effective date the dissolution if not effective on the date of filing: (effective date cannot be prior to or more than 90 days later than date document is received for filing)	
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to sectio 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	n
	No longer owns assets or conducts business in Florida	
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:	
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:	- NOF 3
_	Hums Howell Sherry Howell, VP, Managing Member	6 -
	Signature Printed Name	?
	FILING FEE: \$25.00	en en