Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Yvonne Mevidez, Paralegal

Account Name : WHITEBIRD JOHN Account Number : I20210000078 : (321)327-5580 Phone

Fax Number : (321)327-5655

> LLC DISSOLUTION OR WITHDRAWAL A & W FAMILY HOLDINGS, L.L.C.

Certificate of Status	0
Certified Copy	0
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## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

<b>i</b> .	The name of a limited liability company is  A&W Family Holdings, L.L.C.
2.	The Articles of Organization were filed on March 29, 2005 and assigned
	document number L05000030781
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)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
	The unanimous consent of all members to dissolve.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs:
	22
6	Signature of an authorized person or if there are no members, the signature of the person appointed and listed bove to wind up the company's activities and affairs:
	$\sim 10^{-3} M_{\odot} M_{\odot} M_{\odot}$
	Janet Ellen Anderson, Manager -
	Signature Printed Name FILING FEE: \$25.00

## 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.

Name of Limited Liability Company:
Document number of Limited Liability Company is:
Date of dissolution was:
Description of information that must be included in a written claim:
1. Name and Address of Claimant.
2. Amount of Claim.
3. Basis of Claim.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)  5876 Lake Pine Road
Vero Beach, Florida 32967
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.
Janet Ellen Anderson, Manager All Lull Lull '
Printed Name of the Person Filing Signature of the Person Filing

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