LOL 0000 17176

/D-					
(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
	سا				
(Business Entity Name)					
(Decument Number)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
<u> </u>					
Special Instructions to Filing Officer:					

Office Use Only



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02/10/15--01020--014 **25.00



A CONTROL FEB 18 7015

COVER LETTER * **

JECT: _	D&R Converters, LLC (Name of I	Limited Liability Compar	ny)
enclosed A	Articles of Dissolution and fee(s) are su	bmitted for filing.	
ase return a	Il correspondence concerning this matte	er to the following:	
	Robin Reynolds		
		(Name of Person)	
	D&R Converters, LLC		
		(Firm/Company)	
	4527 Hercules Ave.		
		(Address)	
	Jacksonville, FL 32205		
	(Cir	ty/State and Zip Code)	
r further inf	ormation concerning this matter, please	call:	
Rot	oin Reynolds	904	302-3336
	(Name of Person)		ode & Daytime Telephone Num

MAILING ADDRESS:

\$25.00 Filing Fee and Certificate of Dissolution

Enclosed is a check for the following amount:

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

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability compar D&R Converters, LLC	ny is	·			
2. The Articles of Organization were file	d on February 7, 2006	and assigned			
document number L06000013176					
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)					
. A description of occurrence that result 605.0707, Florida Statutes, (copy 605.0	ed in the limited liability compan 1707 on back cover letter).	y's dissolution pursuant to section			
Business closed.					
		. _			
5. If there are no members, enter the nam	e and address of the person appoi	nted to wind up the company's			
activities and affairs:					
		24			
		- G G			
	<u> </u>				
5. Signature of an authorized person or if isted above to wind up the company's ac	there are no members, the signat tivities and affairs:	, m. c.			
hi ARiemand	Robin Reynold	's			
Signature	Pi	rinted Name			

FILING FEE: \$25.00