

L06000027765

(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:

3/27

L0627765

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500068105225

03/20/06--01045--001 **30.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 MAR 20 PM 1:37

APPROVED
AND
FILED

ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY

APPROVED
AND
FILED

06 MAR 20 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. The name of a limited liability company is

Parley Pioneer, LLC

2. The Articles of Organization were filed on 3/16/06 and assigned document number

LOG000027765

3. The date the dissolution was approved: 3/16/06

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

It was filed under the wrong
Corporation Status

5. CHECK ONE:

- ☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.
-OR-
☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

- ☒ There are no suits pending against the company in any court.
-OR-
☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Printed Name

Parson

Geisela Parson

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Parley Pioneer, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following.

Geisela Parson

(Name of Person)



(Firm/Company)

516 Robbins Rest Circle

(Address)

Davenport, FL 33896

(City/State and ZIP Code)

For further information concerning this matter, please call:

Geisela Parson at (321) 695-5356

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(Additional fee for each document)

☐ \$60.00 Filing Fee,
(Additional fee for each document)
(Additional fee for each document)

MAILING ADDRESS:
Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

1000 ...
1000 ...

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