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EXAMINER

SECRETARY OF STATE

Priss

COVER LETTER

	stration Section sion of Corporations		
SUBJECT:	SUSAN B WI	LSON, LLC.	
Sobolett.	(Name of Limite	d Liability Company)	
The enclosed	Articles of Dissolution and fee(s) are submitted	ed for filing.	
Please return a	all correspondence concerning this matter to t	he following:	
	SUSAN B WILSON		
	(Name	e of Person)	
	SUSAN B WILSON , L L	/Company)	
	530 BROOKS COURT	/Company)	
		Address)	
	POLK CITY, FL 33868		
		e and Zip Code)	
For further inf	formation concerning this matter, please call:		
SU	ISAN B WILSON	at (863) 984-1002	
	(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a ch	heck for the following amount:		2774
\$25.00 Filing	·	Certified Copy Certificate of Status &	
	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	

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

SUSAN B WILSON	, LLC		
2. The Articles of Organization were filed on L06000067606	/06/2006	and assigned	document numb
3. The date the dissolution was approved: 12/31	/2010	·	
4. A description of occurrence that resulted in the I 608.441, Florida Statutes, (copy 608.441 on bac Voluntarily closed business and a			
5. CHECK ONE:			
All debts, obligations and liabilities of the OR-Adequate provision has been made for the			-
6. All remaining property and assets have been dist rights and interests.	tributed among its member	s in accordance wit	h their respecti
7. CHECK ONE:			
There are no suits pending against the con-OR-Adequate provision has been made for t		ment, order or decr	ee which may t
entered against it in any pending suit.			TALES TALES
natures of the members having the same percentage	e of membership interests	necessary to approv	e the dissolution
Signature		Printed Name	SEE.
Swan B. Wilson	Susan	B. Wilson	F STAT
			2 m
	•		