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EXAMINER

COVER LETTER

	ration Section on of Corporations	
; SUBJECT:	(Name of Limited Liability Company)	
	(Name of Limited Liability Company)	
The enclosed A	rticles of Dissolution and fee(s) are submitted for filing.	
Please return al	l correspondence concerning this matter to the following:	veed
		2011 SEC
	ROSE M. WOOLEY	OH FEBIL AH HE: 4 SEUNCIARY OF STATE ALLAHASSEE, FLORIE
	(Name of Person)	
		TEBIL AME
	(Firm/Company)	
•	7102 Silverwood DR	6
	(Address)	-
	7102 Silverwood DR (Address) NEW PORT Richey, FL 34654	
	(City/State and Zip Code)	
For further info	rmation concerning this matter, please call:	
	ROSE M. WOOLEY at 727, 848 968	3
	(Name of Person) (Area Code & Daytime Telephone Nu	mber)
Enclosed is a che	ck for the following amount:	
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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

1. The name of a limited liability company is		•	
Willy T's L	LC		
2. The Articles of Organization were filed on	07/25/2006	and assigned docume	ent numbe
3. The date the dissolution was approved:/	0/31/2010	TALE	2011
4. A description of occurrence that resulted in the li 608.441, Florida Statutes, (copy 608.441 on back	imited liability company' k cover letter).	s dissolution pursuarito se	
<u>RETIRED</u>		SSEE STATE	- H
		97 95	
		71.P	
5. CHECK ONE:		,.	
 6. All remaining property and assets have been districted and interests. 7. CHECK ONE: There are no suits pending against the conformal c	ompany in any court.		·
ignatures of the members having the same percentage	e of membership interests	necessary to approve the d	issolution
Signature		Printed Name	
Rose M. Wooley	<u>Ros</u>	SE M. WOOLE	<u> </u>
Willio Would	<u> Will</u>	IAM WOOLEY	<u>'</u>