## L0000077860

(Requestor's Name)				
(Address)				
(Address)				
(City/Ctata/Tin/Dhona to				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				

Special Instructions to Filing Officer:

L. SELLERS

MAY - 4 2009

**EXAMINER** 

Office Use Only



000154350010

05/01/09--01028--018 \*\*25.00

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## **COVER LETTER**

TO:

Registration Section

Division	n of Corporations		
SUBJECT:	THE COX TEAM	1,46	
(Name of Limited Liability Company)			
The enclosed Ar	ticles of Dissolution and fee(s) are su	abmitted for filing.	
Please return all	correspondence concerning this matt	er to the following:	
	CHARLES	R. CX	
		(Name of Person)	
	·, ·	(Firm/Company)	
	3301 CYF	(Address)  FL 33596  Ty/State and Zip Code)	
		(Address)	
జై.యోక్షకు కం -	VALRICO,	FC 33596	
e na new Goppins	(Cit	y/State and Zip Code)	<del></del>
For further inform	nation concerning this matter, please	call:	. 13.1.
CIM	Name of Person)	at (813) 654-307 (Area Code & Daytime Telephone N	70
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	( i.i.d. coco de sujunio releptorio i	umver j
Enclosed is a check	c for the following amount:		
\$25.00 Filing Fe	e 30.00 Filing Fee & Certificate of Status	Certified Copy Certificate (additional copy is enclosed) Certified C	Filing Fee, of Status & Copy Il copy is enclosed)
	MAILING ADDRESS: Registration Section	STREET/COURIER AD	DRESS:
	Division of Corporations	Registration Section Division of Corporations	
	P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

FILED

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1. The name of a limited liability company is  THE COX TEAM, LL	SECRETARY OF STATE TALLAHASSEE FLORIDA
<b>,</b>	UST 8, 2006 and assigned document number
3. The date the dissolution was approved: 4-28	3-09
<ol> <li>A description of occurrence that resulted in the limited 608.441, Florida Statutes, (copy 608.441 on back covered)</li> </ol>	d liability company's dissolution pursuant to section er letter).
THIS COMPANY WAS I	VEVER USED
5. CHECK ONE:	
All debts, obligations and liabilities of the lim	nited liability company have been paid or discharged.
Adequate provision has been made for the del	bts, obligations and liabilities pursuant to s. 608.4421.
<ol><li>All remaining property and assets have been distribute rights and interests.</li></ol>	ed among its members in accordance with their respective
7. CHECK ONE:	
There are no suits pending against the compar	ny in any court.
	tisfaction of any judgment, order or decree which may be
Signatures of the members having the same percentage of m	nembership interests necessary to approve the dissolution:
Signature	Printed Name
Sale K. Ox	CHARLES R. COX
Wyma K. Cap	MYRNA K. COX

FILING FEE: \$25.00