LOL 0000 79756

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300271953273

04/27/15--01009--003 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

The enclosed Articles of Dissolution and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
	Aun C
Half off	Books
479 Karl	o C+
Deltona	FL 32725
For further information concerning this matter, please call:	nd Zip Code)
Charles Munk	at (407) 417-7709
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$25.00 Filing Fee and Certificate of Dissolution	\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
rananassee, FL 52514	2001 Executive Center Chele

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

l.	The name of a limited liability company is Half Off Brooks LLC
	Half Off Books LLC
2.	The Articles of Organization were filed on 8 9 2006 and assigned
	document number <u>L06000079356</u>
3.	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)
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707. Florida Statutes, (copy 605.0707 on back cover letter).
	Out business closed its doors
	C. h. as ac
	for business.
5.	If there are no members, enter the name and address of the person appointed to wind up the company's
	activities and affairs: Charles A. Murk
	47.9 Karlo Ct
	Deltona FL 32725
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and the data above to wind up the company's activities and affairs:
	Halla Mul Charles Munk
_	Signature Printed Name

FILING FEE: \$25.00