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(Re	equestor's Name)
/A		
. (Ac	ddress)	
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. (Ci	ty/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status

Special Instructions to Filing Officer:

L. SELLERS

APR 1 4 2008

EXAMINER

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Wallen Lawn Care LLC					
(Name of Limited Liability Company)					
The enclosed Articles of Dissolution and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Chris Wallen (Name of Person)					
(Name of Person)					
Wallen Lawn Care LLC					
(Firm/Company)					
31907 Roxanne Way (Address)					
Dade City, FL 33525 (City/State and Zip Code)					
For further information concerning this matter, please call:					
Chris Wallen at (813) 714-4515 (Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$25.00 Filing Fee Certificate of Status Certificate of Status Solve Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)					

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

FILED

2008 APR 11 PM 2: 00

1. The name of a limited liability company is Wallen Lawn Ca		LLC		SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. The Articles of Organization were filed on	Jan	wary,	<u>2008</u>	and assigned document number		
3. The date the dissolution was approved: \triangle	<u>larc</u>	h1,a	2008	<u>.</u> .		
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).						
I obtained anoth						
accounts to anot	. (lau		service.		
I was the sole o)Wn	er c	C	Companyi		
All debts, obligations and liabilities OR- OR- Adequate provision has been made 6. All remaining property and assets have been rights and interests. 7. CHECK ONE: There are no suits pending against to OR- Adequate provision has been made entered against it in any pending suits. Signatures of the members having the same percentage.	for the n distributhe comfor the it.	debts, obliquited among pany in any satisfaction	gations and liabilg its members in court. To court. To fany judgmen	lities pursuant to s. 608.4421. accordance with their respective accordance		
Signature				Printed Name		
Signature			Chris	s Wallen		
						

FILING FEE: \$25.00