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Last Stand LLC

20 Bradlee Rd, Marblehead Ma 01945 954-647-3358 firstcitycapital@yahoo.com

june 8, 2016

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: The Last Stand LLL (Name of Limited Liability Company)					
(Name of Emitted Liability Company)					
The enclosed Articles of Dissolution and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Adam Rand (Name of Person)					
(Name of Person)					
The Last Stand LLC (Firm/Company)					
(Firm/Company)					
Zo Bradlee Rd (Address)					
(Address)					
Marbleheal, MA 01945					
(City/State and Zip Code)					
For further information concerning this matter, please call:					
Adan Ranl at (954) 647-3358 (Name of Person) (Area Code & Daytime Telephone Number)					
(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 **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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				
	The Last	+ Stand Li		
2. The Articles of Organization	were filed onZ	120/2007	and assign	ned
document numberLO	70000190	211	,	1
3. The delayed effective date the (effective date) Note: If the date inserted in this listed as the document's effective date.	ate cannot be prior to or n is block does not meet t	iore than 90 days later i he applicable statutoi	than date document is re- ry filing requirements,	
4. A description of occurrence to 605.0707, Florida Statutes, (co	hat resulted in the lin opy 605.0707 on back	nited liability comp c cover letter). asset	eany's dissolution pu	company
5. If there are no members, enter	r the name and addre	ss of the person ap	pointed to wind up t	he company's
activities and affairs:				5
				72
6. Signature of an authorized pe listed above to wind up the comp	rson or if there are no pany's activities and a	o members, the sign affairs:	nature of the person	appointed and
	1//		10 -	٨
11.11			Adam Ra	nd
Signature		Printed Name		

FILING FEE: \$25.00