# 1670000 ZC9R

(Requestor's Name)
(Address)
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(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiliess Efficy Name)
(Document Number)
Certified Copies Certificates of Status
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09/22/14--01010--011 \*\*25.00

14 SEP 22 PM 7: 31
SECRETARY OF SHALE

## PLEASE SEND CERTIFICATE TO CHARLES STRIPLING 340 FULLER STREET CAMILLA GA 31730

ANY QUESTIONS PLEASE CONTACT CHARLES STRIPLING AT 229-886-7962

**Charles Stripling** 

Clacker

### **COVER LETTER**

Division of Corporations
SUBJECT: Two Strpling LLC (Name of Limited Liability Company)
(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:
Charles Stropling (Name of Person)
Two straplone LLC (Firm Company)
340 Fuller St (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
Charles Strap Ing at (779) 886-7962  (Name of Person) at (779) 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:

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
	Tue Strplan LLC
2.	The Articles of Organization were filed on $3/12/2007$ and assigned
	document number <u>L07000</u> 26912
3.	The delayed effective date the dissolution if not effective on the date of 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).
	Assets have been sold +
	Uperation ceased
5.	If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:
	SECRET ALL AREA
	3SSEC 92 17
6. lis	Signature of an authorized person or if there are no members, the signature of the person appointed and ted above to wind up the company's activities and affairs:
	Clare Striplas Signature  Charles Striplas Printed Name

**FILING FEE: \$25.00**