

L07000044303

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

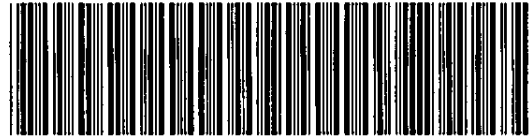
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch NOV 10 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CANINE TO FELINE PET SITTING, 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:

RACHEL KENDLE

(Name of Person)

CANINE TO FELINE PET SITTING, LLC

(Firm/Company)

5298 BONAIRRE BLVD

(Address)

ORLANDO FL 32812

(City/State and Zip Code)

For further information concerning this matter, please call:

RACHEL KENDLE

(Name of Person)

at (407) 712-5097

(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**

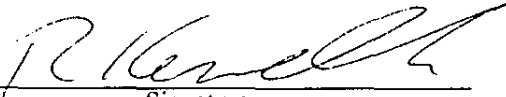
1. The name of a limited liability company is
CANINE TO FELINE PET SITTING, LLC
2. The Articles of Organization were filed on APRIL 26, 2007 and assigned
document number L07000044303
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be 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).
BUSINESS CEASED OPERATIONS. NO LONGER HAS ANY MEMBERS.

5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs: RACHEL KENDLE

5298 BONAIRRE BLVD

ORLANDO FL 32812

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:



Signature

RACHEL KENDLE

Printed Name

FILING FEE: \$25.00

14 NOV - 6 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED