## . NO70000 94730

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT:	DY FARM LLC
7)	Name of Limited Liability Company)
The enclosed Articles of Dissolution and fee	e(s) are submitted for filing.
Please return all correspondence concerning	
g	uni ninter te me rene mig
	(Name of Person)
	DY FARM, LLC (Firm/Company)
	(FinivCompany)
	1.0. Box 201
	P.O. Box 201 Venice F1 34284
	(City/State and Zip Code)
For further information concerning this matt	er, please call:
(Name/of Person)	10UM9 at (941) 809-0860 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee and Certificate of Di	issolution
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1.	The name of a limited liability company is  DY FARM LLC	
2.	The Articles of Organization were filed on $\frac{8/17/2007}{}$ and assigned	
	document number <u>L07000084730</u>	
3.	The delayed effective date the dissolution if not effective on the date of filing: 12/31/20 (effective date cannot be prior to or more than 90 days later than date document is received.  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this distinct as the document's effective date on the Department of State's records.	)2] for filing) ate will not be
4.	A description of occurrence that resulted in the limited liability company's dissolution pursuant 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).	072 to section
	Loss of Leased Property	
		): 0 <b>0</b>
_		
5.	If there are no members, enter the name and address of the person appointed to wind up the com	manu's
	activities and affairs: Dot KJ 6- Young Sp	party s
	MARKD. Housig)	
	P.O. Box 201	<del></del>
	VENICE I=1 34284	
6. l abo	Signature of an authorized person or if there are no members, the signature of the person appoint ove to wind up the company's activities and affairs:	ed and listed
	Signature FILING FEE: \$25.00	ng