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(Address)	
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(Document Number)		
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C. GOLDEN APR - 8 2020

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Furniture Industry 161, 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:			
(Name of Person)			
F-UINITURE INDUSTRY 101, LLC (Firm/Company)			
824 Jungle Avenue North			
St Petersburg, FL 33710 (Ciry/State and Zip Code)			
For further information concerning this matter, please call:			
Scinies D. Green at (727) 580-7143 (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: Registration Section Division of Corporations P.O. Box 6327 Street Address: Registration Section Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

1. The name of a limited hability company is	200 - 20 Pa (200
Furniture Industry 101	, Lic
2. The Articles of Organization were filed on $\underline{\cup an}$	uary 12, 2008 and assigned
document number <u>LUSCCOCO 7032</u>	_
3. The delayed effective date the dissolution if not effective date cannot be prior to or me Note: If the date inserted in this block does not meet the listed as the document's effective date on the Department.	ore than 90 days later than date document is received for filing) c applicable statutory filing requirements, this date will not be
4. A description of occurrence that resulted in the limi 605.0707, Florida Statutes, (copy 605.0707 on back	ted liability company's dissolution pursuant to section cover letter).
All of the members of 41	ie organization consent
to its dissolution. The	
Conducting business.	-
5. If there are no members, enter the name and address activities and affairs:	s of the person appointed to wind up the company's
	
6. Signature of an authorized person or if there are no above to wind up the company's activities and affairs:	members, the signature of the person appointed and listed
Time Office	James D Green
/ Signature	Printed Name

FILING FEE: \$25.00