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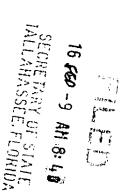
(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	
Certified Copies	·	
Special Instructions to	Filing Officer:	

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FEB 1 0 2016 J SHIVERS

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Super Suds Express No. 2 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:

Kathy Carlson				
(Name of Person)				
Super Suds No. 2, LLC				
(Firm/Company)				
1615 Village Square Blvd, Suite 3				
(Address)				
Tallahassee, FL 32309				

For further information concerning this matter, please call:

Kathy Carlson at (850) 222-9730 (Area Code & Daytime Telephone Number)

(City/State and Zip Code)

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

	The Articles of Organizate document number L08000	· · · · · · · · · · · · · · · · · · ·	and assigned
	document number		
3.	Note: If the date inserted i	e the dissolution if not effective on the date of filitive date cannot be prior to or more than 90 days later than dann this block does not meet the applicable statutory filinfective date on the Department of State's records.	te document is received for fiffing)
4.	605.0707, Florida Statutes	ce that resulted in the limited liability company's c, (copy 605.0707 on back cover letter).	•
	The carwash was sold. All o	debts have been paid and all proceeds have been distrib	uted to the members.
5.	If there are no members,	enter the name and address of the person appointe	ed to wind up the company's
5.	If there are no members, a activities and affairs:	enter the name and address of the person appointe Bradford R. Lewis	ed to wind up the company's
5.			ed to wind up the company's
5.		Bradford R. Lewis	ed to wind up the company's
5.		Bradford R. Lewis 1615 Village Square Blvd. Suite 3	od to wind up the company's LANGE AND STATE ORIGINAL STATE ORIGINA
6.	activities and affairs: Signature of an authorize	Bradford R. Lewis 1615 Village Square Blvd. Suite 3	CONCTARY OF STAIL
6.	activities and affairs: Signature of an authorize	Bradford R. Lewis 1615 Village Square Blvd. Suite 3 Tallahassee, FL 32309 d person or if there are no members, the signature	CONCTARY OF STAIL
6.	activities and affairs: Signature of an authorize	Bradford R. Lewis 1615 Village Square Blvd. Suite 3 Tallahassee, FL 32309 d person or if there are no members, the signature	CONCTARY OF STAIL
6.	activities and affairs: Signature of an authorize	Bradford R. Lewis 1615 Village Square Blvd. Suite 3 Tallahassee, FL 32309 d person or if there are no members, the signature company's activities and affairs: Bradford R. Lewis	CONCTARY OF STAIL