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(Re	questor's Name)		
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(Ad	dress)	· · · · · · · · · · · · · · · · · · ·	
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10:	y/State/Zip/Phone	- 40	
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Dr	cument Number)		
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Certified Copies Certificates of Status			
Special Instructions to	Filing Officer:		
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Office Use Only



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COVER LETTER

то:	Registration Section Division of Corporations	· ·		
SUBJ	Darrk Enterprises LLC			
., ., ., .,		nited Liability Company)		
The en	iclosed Articles of Dissolution and fee(s) are subm	nitted for filing.		
Please	return all correspondence concerning this matter t	o the following:		
	Darrell V Blanchard			
	(N:	ame of Person)		
	(Fi	imi/Company)		
	1765 E Nine Mile Road Ste 1			
		(Address)		
	Pensacola, FL 32514			
	(City/Si	tate and Zip Code)		
For furt	ther information concerning this matter, please cal	l:		
	Darrell V Blanchard	at ()		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed	d 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	Street Address:		
	Division of Corporations	Registration Section Division of Corporations		
	P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee		
	ranadassee, FL 52514	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

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and assigned
filing: 2/20/2021 in date document is received for filing) filing requirements, this date will not be
y's dissolution pursuant to section
rence resulting in dissolution.
that member, Darrell V Blanchard,
nted to wind up the company AH 11 23
The person appointed and listed
To the second se

FILING FEE: \$25.00