

L 080000 29947

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

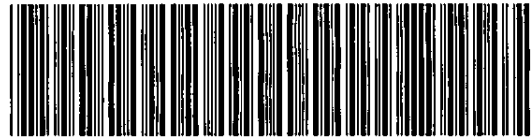
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: Benny Lister Family, LLC

The enclosed Articles of Dissolution and fee[s] are submitted for filing.

Please return all correspondence concerning this matter to the following:

Scott B. Barloga, Esq.
Pope & Barloga, P.A.
P.O. Box 1609
Panama City, FL 32402

For further information concerning this matter, please call:

Scott B. Barloga at (850) 784-9174

Enclosed is a check for the following amount: \$25.00 Filing Fee

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

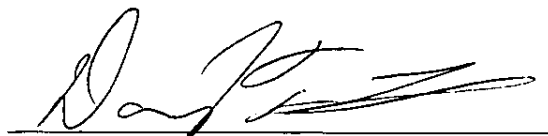
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF DISSOLUTION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is: **Benny Lister Family, LLC**
2. The Articles of Organization were filed on March 24, 2008 and assigned document number L08000029947.
3. The date dissolution was approved: May 15, 2014.
4. The company is hereby dissolved because all of the members of the company have consented to the dissolution in writing pursuant to section ~~608.441(1)(c)~~ ^{605.0707}, Florida Statutes.
5. All debts, obligations and liabilities of the limited liability company have been paid or discharged.
6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.
7. There are no suits pending against the company in any court.

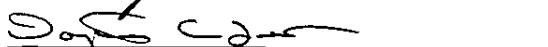
Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

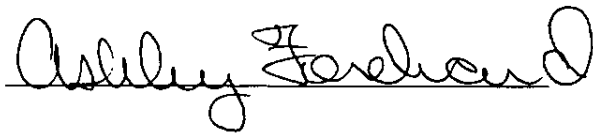


Printed Name

Darryl T. Lister



Dayton Lister



Ashley Forehand

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